Fundraising Request

Building 194, 37<sup>th</sup> Street, Fort Cavazos, Texas 76544

Phone: 254.287.0240 (DSN) 737.0240 Fax: 254.532.8031

Section One – Organization information						
Organization Name: (Unit Name, etc)			Date of Request:			Informal Fund Current Balance:
From: (Event POC)	Phone:			E-mail Address of POC:		
Commander Name (Print):	Commande	r Phone:	Phone: Co		Commander Email Address:	
Costion Two Sweet data!!						
Section Two – Event details  Type: (ex. Golf Tournament, Bake Sale, etc.)  Date(s):  Time(s):						
Type: (ex. Golf Tournament, Bake Sale, etc.)		.,			5):	
Location: (Bldg name and #)		Purpose: (How will the proceeds be used?)				
List of items to be sold: (If Applicable)  Prices of items to be sold: (A price range is sufficient)						ge is sufficient)
Misc. event details: Food Permits and (if applicable with food sales) Please attach the food booth permit and (A minimum of 2 food handler's certificat	s certificates		How many volunteers pathis event?			
Section Three – Rules and guidelines for fundraising						
<ul> <li>Procedure before the event</li> <li>This request will be submitted to DFMWR, Fundraiser Coordinator no later than 15 - 30 business days prior to the event date.</li> <li>Please attach all flyer's to be used in association to this event to this request for approval.</li> <li>Contact Preventive Medicine Office at 288-9112/1665 for certificates and permits if conducting food sales.</li> </ul>						
Procedure during the event						
Military members may NOT participate in uniform, during on-duty status, nor participate without the Commander's prior approval.						
Approval memorandum and supporting documents (if applicable) are to be onsite and displayed throughout the entire duration of the event.						
<ul> <li>Approval</li> <li>Approval will be based upon the requested date, time, and location ONLY. Any changes must be approved by the Fundraiser Coordinator.</li> <li>Final coordination is mandatory for each event at least 5-10 business days prior the event with facility manager.</li> </ul>						
Liability  If approved, it is agreed that any and all claims, loss, and liability, however caused, arising out of, or in any way connected with this event, whether or not caused or contributed to by any negligence or alleged misconduct on the part any of the participants and are held accountable.						
Section Four –Organization's signature						
I request authorization to hold a fundraising event on Fort Cavazos. I certify that this organization is in compliance with AR 600-29 and. Furthermore, I have read the notes in section three of this form and understand them fully. The organization will conduct this event with the strict understanding that violation of instructions, as outlined in the above notes, may result in the approval memorandum being rescinded.						
X X X X Signature of Point of contact for event Signature of Commander						
Signature of Point of contact for event			Signature of Commander			