



Allegro Fundraiser Proposal

Name of Fundraiser: _____

Name of Person Submitting: _____

Contact Number: _____

Description of Fundraiser: _____

Proposed Time Frame to Run: Start date: _____

End date: _____

Pick up date (if applicable) _____

Proposed Type: (circle one) **Individual** / **General** / **No Preference**

Profit Margin to Group/Individual: _____

Will any costs need to be fronted from General Fund? **Yes**_____ **No**_____

If so, please give a detailed description of those costs and the amount. _____

Please attach brochure, or other information to this form.

For office use only:

Submitted to Executive Board Member on ____/____/____. Initials _____

Submitted to Executive Board for approval on ____/____/____.

Approved _____ Denied _____ Initials _____

Presented to General Membership on ____/____/____