

District
Out of School Fundraising Approval Form

Each fundraising group shall complete this form and get prior approval by a principal before proceeding with a fundraising activity.

Group name/organization: _____

Name of advisor: _____ Phone number: _____

Contact person: _____ Phone number: _____

Fundraising activity description: _____

Describe where and when the fundraising would be conducted: _____

Why do you want to raise the money (purpose/goal/for what activity)? _____

Approximately how many organizations, students, or adults will be involved in the selling for the fundraising event? _____

➔ Attach a copy of fundraising form and/or brochure that include product/service and selling price:

Anticipated gross _____ Anticipated tax _____ Anticipated expense _____

Date fundraiser starts: _____ Date fundraiser ends: _____

The district Wellness Policy states that:

****District encourages non-food fundraising projects. If food items are to be sold the Competitive Foods Nutrition Standards (appendix 5) shall be followed.***

If your group is selling processed food (not fresh, whole items), please complete the following nutrition information for each item sold to allow comparison with the Competitive Foods Nutrition Standards:

Item _____ Serving size _____

_____calories/serving _____grams saturated fat/serving

_____grams sugar/serving _____mg sodium/serving

Add nutrition information for additional items to the back of this form.

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Competitive Foods Nutrition Standards

Foods:

Standards	≤ 200 calorie snack	≤ 400 calorie entree
≤ 35% cal from total fat	≤ 7.5 gm	≤ 15.5 gm
< 10% cal from saturated fat	< 2 gm	< 4 gm
Trans fat < 0.5 gm	ZERO	ZERO
≤ 35% cal from sugar	≤ 17.5 gm	≤ 7 gm and ≤ 35% cal
Sodium (Na)	≤ 200 -250mg	≤ 480-600 mg
Dietary fiber	≥ 2 gm	≥ 2 gm/grain serving

Beverage standards and size limit:

Water or non-caffeinated, non-fortified beverages < 5 calories (with or without non-nutritive sweetener, carbonation, or flavoring)
8 oz lowfat plain or non-fat plain or flavored milk
8 oz 100% fruit or vegetable juice
12 oz sports drinks for student athletes in sport programs involving vigorous activity ≥ 1 hour
No energy drinks

Approved by Advisor: _____ Date: _____

Approved by Principal: _____ Date: _____