

Form 8.7 Fundraising Approval

4-H Club Name: _____ Date: _____

Contact Person: _____ Phone: _____

Fundraising Activity

Date for Activity: _____ Estimated Income \$ _____

Outline the activity, including products to be sold, or services to be rendered.
(Attach pages as needed)

Anticipated Use of Funds. *(Attach pages as needed)*

Describe how the 4-H Name and Emblem will be used. *(Attach pages as needed)*

We confirm the accuracy of the information provided above.

Signature of the 4-H Club President: _____ Date: _____

Signature of the 4-H Adult Volunteer: _____ Date: _____

Signature of County Director: _____ Date: _____