

Cass County 4-H Fund-Raiser Application



This form needs to be completed *two weeks prior* to the fund raising activity and returned to:

MSU Extension 4-H Program Coordinator
120 N Broadway, Suite 209
Cassopolis MI 49031-1370

Fund-raiser activity must be approved before it is held.

What is the proposed fund-raising activity?

When is the proposed fund-raising activity to take place?

Where is the proposed fund-raising activity to be held?

What is the fund-raiser's educational value to the members?

Proposed starting date of the activity: _____ Time: _____

Expected ending date of the activity: _____

Club name: _____ Phone: _____

Address: _____

Key Leader making request: _____ Phone: _____

For Office Use Only:

Approved: _____ Date: _____

Staff Signature