

**Tulare Joint Union High School District
Board Authorized School Connected Organizations
Fundraiser Planning Form**

School Site: _____

Name of Organization: _____

Mailing Address: _____

Fundraiser	Location	Estimated Date	Student Involved in Sales Y/N	Estimated Revenue
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

*Attach additional pages, if necessary

Completed by: _____ Date: _____

Please return completed form to: Tulare Joint Union High School District
Business Office
426 North Blackstone Street
Tulare, CA 93274
(559) 688-2021 Phone
(559) 687-7421 Fax
laurie.vanessen@tulare.k12.ca.us