

# SAN BENITO HIGH SCHOOL ASB

## ACTIVITY REQUEST FORM

**INSTRUCTIONS:** Please complete both sides of this form and submit it to the Business Office **two school weeks prior to the start date of your event.** Completed forms will be sent to the next ASB meeting for approval. A copy will be returned to your group after it is approved or denied. **The section on the reverse side is required by the auditors.** We understand that exact figures are almost impossible to generate but please do your best to list your proposed expenses and your potential sales. Please be sure to obtain **ALL** required signatures prior to submitting your request. Failure to do so may result in a delay to the start date of your event.

### AUTHORIZATION TO CONDUCT A SCHOOL ACTIVITY

Proposed Activity: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

All activities requests **must be signed by the Principal** before the form can be turned in to the Business Office.

\_\_\_\_\_  
*Principal's Approval*

\_\_\_\_\_  
*Date*

1. Date and time of Activity: \_\_\_\_\_
2. Will a school facility be required? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, have you filed a facility request form with the Business Office? \_\_\_\_\_ Yes \_\_\_\_\_ No
3. PRICES: With Activity Stamp \_\_\_\_\_ Without Stamp \_\_\_\_\_ Other prices \_\_\_\_\_
4. Staff member in charge of this activity: \_\_\_\_\_
5. Additional contacts if any for this activity: \_\_\_\_\_ Phone No. \_\_\_\_\_
6. Staff member's Home or Cell phone number \_\_\_\_\_ School Ext. \_\_\_\_\_
7. Advisor or student must complete the reverse side to show your estimated expenses and sales.

**CONTRACT WITH THE ASSOCIATED STUDENT BODY:** We fully accept the responsibility for carrying out this proposed activity. We have checked with the Student Activities Director to make sure all the proper forms have been filed. We understand the procedures we must follow to receive approval for this activity.

\_\_\_\_\_  
Advisor's Signature                      Date                      Student's Signature                      Date

**STUDENT COUNCIL ACTION:** This activity was presented to Student Council on \_\_\_\_\_  
and the following action was taken: \_\_\_\_\_ (Date)

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_ Approval Pending \_\_\_\_\_

Comments/Explanation: \_\_\_\_\_

\_\_\_\_\_  
Commissioner of Clubs

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director of Student Activities

\_\_\_\_\_  
Date

\_\_\_\_\_  
Business Office

\_\_\_\_\_  
Date

**SAN BENITO HIGH SCHOOL ASB  
POTENTIAL SALES REVENUE ANALYSIS**

**POTENTIAL PROFITS FROM THIS ACTIVITY:** Please estimate as close as possible.

Description (What are you selling or sponsoring?)	Quantity	Unit Price (Cost per item)	Extended Total (Guess how much you'll sell)
1)			
2)			
3)			
4)			
5)			

**TOTAL POTENTIAL SALES** (Take a good guess, add all the totals and write them here) \$ \_\_\_\_\_

**PROPOSED EXPENSES** (What are the costs involved?)      **EXPENSE AMOUNT**

1)	_____	_____
2)	_____	_____
3)	_____	_____
4)	_____	_____
5)	_____	_____
6)	_____	_____
7)	_____	_____
8)	_____	_____

(i.e. product & service costs, DJ for music, advertising, security, copies, postage, BLT food items, etc.)

**TOTAL PROPOSED EXPENSES** (Add up everything under Expense amount.) \$ \_\_\_\_\_

<b>NET POTENTIAL REVENUE</b>	<b>\$</b>
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(Subtract the **Total** Proposed Expenses from the **Total** Potential Sales.) (Sales less Expenses)

Send this form to either the Business Office or the ASB Advisor. (At least by Tuesday)

Follow up:

Did this fundraiser perform as expected?      \_\_\_\_\_ Yes      \_\_\_\_\_ No

Why or Why Not \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_