## **Fundraiser Request Form 2024-2025**

Please complete and email to: PAULAS@STCLAREROSEVILLE.ORG

Event Name:	
Requested Date(s):	Time of Event:
Ministry:	Submitted By:
Phone:	Email:
Facility Location Requested:	
Purpose of Fundraiser (proposed use of funds):	
•	me in the Narthex to sell tickets?
If so, what weekend(s) (two w	veekend limit)
	OFFICE USE ONLY
Received by:	Date Received:
Approved by:	Date Received: