

**Windsor Minor Hockey Association
Fundraising Approval Form**

revised: July 19th, 2009

Team: _____

Head Coach: _____

Manager: _____

Manager e-mail: _____ Phone: _____

Fax Number where approval can be faxed: _____

Fundraising Activity Requested:

Has This Been Reviewed at a Team Parents Meeting? - Yes No

Is This Activity CHA Insured? - Yes No

Explanation of Fundraising Activity:

Date of Fundraiser: _____ Time: _____

Location: _____

I have read the Fundraising Guidelines & understand them completely. Yes No

Head Coach or Manager Signature: _____

Fundraiser Approved

Fundraiser not approved

Signature, Director of Fundraising: _____

Date: _____