## Michigan State University Extension Montcalm County 4-H Club Fund Raising Application

This form needs to be completed and returned to the MSU Montcalm Extension Office for approval **before** any fund raising activities can be held.

What is the proposed fund raising activity?		
Where is the proposed fund raising activity	to be held?	
What are the proceeds or profits going to be	e used for or where v	will they be donated?
Proposed starting date of the activity:		
Expected ending date of the activity:		
Club / Group Name:		
Address:		
Person submitting the request:		
Phone:Email:		
Return to: Attn: 4-H Fund Raiser Requ	iest	
	reet, P.O.Box 368	Email: <u>haglun10@msu.edu</u> FAX: 989-831-7515
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For office use only:		
Date Received:Date Reviewed:		
Approval signature:		
Date approval sent:	(check)	MailFaxE-mail