

# LOHS

REQUEST FORM



DATE:

CIRCLE  
TYPE:

**FUNDRAISER**

**EVENT**

REQUESTING ORGANIZATION:

DESCRIPTION OF FUNDRAISER/EVENT:

STUDENT SIGNATURE:

DATE:

ADVISOR/COACH SIGNATURE:

***PLEASE SUBMIT TO ASB AT LEAST 2 WEEKS PRIOR TO THE REQUESTED EVENT/FUNDRAISER***

ASB PRESIDENT OR VP:

ASB CLUB COORDINATOR:

ASB ADVISOR:

APPROVED \_\_\_\_\_

DENIED \_\_\_\_\_

DATE: