IOWA STATE SPORT CLUBS – FUNDRAISING REPORT FORM

Club: ________________________________

Member Completing Form: ________________ Officer Position: ____________________________

Officer Phone #: ______________________ E-mail: ________________________________

Location of Fundraiser: ________________________________

Date(s): ___________________________ Time(s): ________________________________

*Signature: ___________________________ Date: ________________________________

*I verify that the information I am providing is accurate in regards to my club volunteering/performing community service

Total number of club members who attended: _______

Total time spent fundraising: ____________________________

Comments/details/amount-raised in regards to club fundraiser: ____________________________

What were the learning outcomes and/or possible changes you foresee for your next outing? _______

Fundraiser Contact (outside club) (print name): ________________________________

Email: ___________________________ Phone: (______) _____________

*Signature: ___________________________ Date: ________________________________

*I verify the above information is accurate in regards to this Sport Club performing this fundraising work