

AAA - AA - MD FUNDRAISING CONSENT FORM

Date of Application:		
The (Team Name) requests permission to participate in the		MILTON HUSKIES HOCKEY CLUE DRAISING EVENT:
Description of Event: Date of Event: Location of Event:		
Agency/City Permits applied for: (if appl 1. 2. 3.	licable)	
Expected Amount of Funds to be Raised: Expected Amount of Expenses to be Incurred:		
Explain Briefly what the expected Funds	are to be used f	or:
Date Approved: A	pproved by:	(Ice Manager/Scheduler)

Note: All Fundraising Events must be approved well in advance of the event taking place to help the scheduler avoid scheduling conflicts.

