



Team Fundraising Request Form

This form must be completed and submitted to the PV Mavericks Executive Board for approval prior to conducting any team fundraising activity. Please attach all relative fundraising program information including outside vendor forms, rules, and brochures.

Email form to:
pvyfcmavericks@gmail.com

Type of Fundraiser

Team Program (ie: Tackle, Cheer, Flag)

Team Level & Name (ie: 10u Black)

Contact Person

Position / Title

Cell Phone #

Email Address

Name of Fundraising Provider

Event Start Date and Time

Event End Date and Time

Event Location, if online URL

Event Purpose, Funds used for, Comments:

No advertising is allowed until the fundraising program is approved by the Board. All fundraiser communications should indicate the funds are for **PV Mavericks "Team Name"**. All funds will be deposited to Palos Verdes Youth Football & Cheer, Inc for distribution to the team or fundraising recipient. All checks need to be payable to Palos Verdes Youth Football & Cheer Inc. (PVYF & C)

Signature of Applicant

Date

X

Signature of Board Representative

Date

X

***** FOR BOARD USE ONLY *****

Review, Comments:

PVYF&C, Inc.
46-E Peninsula Center Dr. #375
Rolling Hills Estates, CA 90274

APPROVED / DECLINED

Executive Board Meeting Date