



**UNITY Synchronized Skating
Fundraising Activity Approval Request Form**

Your Name: _____ Today's Date: _____

Email Address: _____ Phone Number: _____

UNITY Team: Preliminary Open Juv Intermediate Junior

Requested Fundraising Activity: _____

Date Activity will begin: _____ Date Activity will end: _____

Location of Activity _____

Are you conducting activity to raise money for UNITY as UNITY Group Individual group or for yourself individually? _____

Please provide the details of your activity (attach additional sheet if necessary):

Request submitted by:

Signature: _____ Date: _____

Please give completed form to your UNITY team manager, a Unity Board Member, or put in the Unity binder in the Pro Shop of Sugar Land Ice & Sports Center. (The Board confers daily via e-mail and in person bi-monthly)

Board Meeting Date: _____ Internet / In-Person (Circle One)
Re: _____

YOUR REQUEST IS: <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED

Comments & Conditions:

Board Member Signature: _____ Date: _____

Title: _____