



# Dawson Creek Minor Hockey Association

P.O. Box 1032, Dawson Creek, BC V1G 4H9  
www.dcmha.ca

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**TO: WAYS & MEANS DIRECTOR**  
Dawson Creek Minor Hockey Association  
RE: Application for Fundraising

Date: \_\_\_\_\_

I am informing you of a fundraiser to be held on behalf of our team;

TEAM Name: \_\_\_\_\_

Date(s) of Fundraising Event: \_\_\_\_\_

Type of Fundraising Event (ticket draw, 50/50, bottle drive etc.) \_\_\_\_\_

Location of Fundraising Event: \_\_\_\_\_

Value of Fundraiser: \_\_\_\_\_

Draw Date if Applicable: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Team Position: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Approved by: \_\_\_\_\_  
Ways & Means

Date: \_\_\_\_\_