

High Prairie Minor Hockey Association Fundrasing Request

Team Name:	
Division:	
<i>Team Officials</i>	
Coaches:	
Manager:	
Treasurer(s):	
Type of Fundraiser/Company:	
Start Date of Fundraiser:	
End Date of Fundraiser:	
Expected Profit:	
What will the proceeds be used for?	
I have Read and Understand Policy 13. (a) and (b) regarding Team Finances, Fundraising and Sponsorship (attached)	YES / NO

Manager

Signature

Date

Head Coach

Signature

Date

Treasurer

Signature

Date

Please return form to HPMHA Treasurer treasurer.hpmha@gmail.com
You will be informed via return email if your fundraiser is approved