

Ellicottville Central School

Extraclassroom Activity Club Petition

Club: \_\_\_\_\_

Date of Petition: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Description: \_\_\_\_\_

Please check applicable: fundraiser  donation  expenditure

Location: \_\_\_\_\_

\_\_\_\_\_  
Signature(s) of Advisor(s)

With our signatures, we give permission for the above fundraiser and/or donation and/or expenditure. We understand that when fundraising, this includes permission to start the fundraiser as well as permission to pay directly related expenses.

Printed Name	Signature
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____
4. _____	4. _____
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6. _____	6. _____
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24. _____	24. _____
25. _____	25. _____