

Placed on Calendar

## Calabasas High School EVENT REQUEST

**This form is for any event and/or fundraiser. It must be completed and returned two (2) weeks prior to your event to the assistant principal of activities for approval.**

Today's Date: \_\_\_\_\_

Event Date(s): \_\_\_\_\_ Event Time: \_\_\_\_\_

Event Name: \_\_\_\_\_

Event Sponsor/Supervisor: \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

(Fill out this section only if your event is a fundraiser)

### Revenue Potential Test

*Must be completed for all fundraisers*

	EXPECTED	ACTUAL	DIFFERENCE
<b>REVENUE</b> (sales quantity x sale price)	\$ _____	\$ _____	\$ _____
<b>EXPENSES</b> (quantity x cost)	\$ _____	\$ _____	\$ _____
<b><u>TOTAL PROFIT</u></b> (Net revenue minus total expenses)	\$ _____	\$ _____	\$ _____

### REQUIRED SIGNATURES IN ORDER AS THEY APPLY TO YOUR EVENT:

	Signature	Date
Sponsor:	_____	_____
Initial Calendar Clearance:	_____	_____
Student Store:	_____	_____
Passed by Student Government:	_____	_____
Administrative Approval:	_____	_____
Plant Manager:	_____	_____

***FILL OUT THE REVERSE SIDE OF THIS FORM IF YOU NEED CUSTODIAL  
HELP WITH EVENT SET-UP***

**FACILITY NEEDS**

(Fill out this section only if you need custodial help with event set-up)

Rooms Needed: \_\_\_\_\_  
\_\_\_\_\_

Air Conditioning: \_\_\_\_\_

**Equipment Needs: (mark x if needed)**

\_\_\_\_\_ Chairs - #

\_\_\_\_\_ Tables - #

\_\_\_\_\_ PA System      \_\_\_\_\_ Podium

Other Equipment Needed/Additional Comments:

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**Diagram of Set-up**

(attach additional paper if necessary)