

Cottonwood Joint School District No. 242

STUDENTS

3420F

Student Fund Raising Activities Budget Form

Extracurricular/Co-Curricular Club Budget Request

School Year: _____

Club/Organization Information

Item	Information
Club/Organization	_____
Advisor(s)	_____
Number of Expected Student Members	_____
Student Officers (if applicable)	_____
Budget Account Number (if known)	_____

Beginning Balance

Estimated Beginning Account Balance (July 1):

\$ _____

Estimated Revenue

Fundraising Activities

Fundraiser	Estimated Date	Estimated Income	Notes
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____

Other Revenue

Source	Estimated Amount
Student Membership Dues	\$ _____
Donations/Sponsorships	\$ _____
Participation Fees	\$ _____
Grants	\$ _____
School Allocation	\$ _____
Other	\$ _____

Total Estimated Revenue: \$ _____

Estimated Expenses

General Operating Expenses

Expense	Estimated Cost
Supplies	\$
Equipment	\$
Awards/Recognition	\$
Food/Refreshments	\$
Printing/Advertising	\$
Membership Fees	\$
Other	\$

Club Clothing/Apparel

Item	Estimated Cost	Student Pays Portion	Club Pays Portion
Shirts	\$	\$	\$
Sweatshirts	\$	\$	\$
Jackets	\$	\$	\$
Other	\$	\$	\$

Total Club Apparel Cost: \$_____

Travel & Competitions

Event	Location	Date	Registration	Lodging	Transportation	Meals	Total Cost
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$

Total Travel Expenses: \$_____

State Competition/Conference (if applicable)

Item	Estimated Cost
Registration	\$
Transportation	\$
Lodging	\$
Meals	\$
Miscellaneous	\$

Total State Trip Cost: \$_____

Other Planned Expenses

Description	Estimated Cost
	\$
	\$
	\$

Budget Summary

Category	Amount
Beginning Balance	\$
Total Estimated Revenue	\$
Total Funds Available	\$
Total Estimated Expenses	\$
Projected Ending Balance	\$

Advisor Goals and Planned Activities

Please briefly describe the major goals, activities, competitions, community service projects, or events your organization plans to participate in during the school year.

Budget Considerations

Please explain any anticipated large purchases, unusual expenses, or significant changes from previous years.

Advisor Certification

I certify that this budget is my best estimate for the upcoming school year. I understand that this budget is used for planning purposes and actual revenues and expenditures may vary.

Advisor Signature: _____

Date: _____

Principal Approval: _____

Date: _____

Business Office Approval: _____

Date: _____

Cross References	3420	Student Fund Raising Activities
	7260	Student Activity Funds

Policy History:

Adopted on: August 17, 2026

Revised on: