

**Lawrence Central Performing Arts Association**

**Fundraising Project or Event Proposal Form**

Proposal must include all three pages

Page 1

Title: \_\_\_\_\_

Date Submitted \_\_\_\_\_ Projected / Proposed Event Date(s): \_\_\_\_\_

Location(s): \_\_\_\_\_

Time(s): \_\_\_\_\_

1. Brief Description: *(Schedule A on page 2 for broader description and specifics.)*

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

2. Event Chair, (include phone and e-mail): *(Schedule B on page 2 to list committee chairpersons.)*

\_\_\_\_\_

3. Event Treasurer (include phone and e-mail address): Treasurer must be approved by PA Director.

\_\_\_\_\_

4. Method of raising funds:

- Pledges       Ticket Sales/Admission       Product Sale       Sponsorship       Performance

5. PA people involved. Give estimated percent each group will be expected to participate.

- Parents \_\_\_\_\_%       Students \_\_\_\_\_%       Staff \_\_\_\_\_%       Other \_\_\_\_\_%

6. Which Performing Arts group(s) is/are expected to have the largest participants in this activity?

- All       Band       Choir       Orchestra       Drama       LCPAA Parents

7. Estimate hours of work expected by each participant listed in #6. Include prep, event and post-event hours.

Chair(s) \_\_\_\_\_hrs. Committee Member(s) \_\_\_\_\_hrs. Parent(s) \_\_\_\_\_hrs. Student(s) \_\_\_\_\_hrs. Staff \_\_\_\_\_hrs.

8. What other groups or businesses will be expected to participate. What will be their involvement?

\_\_\_\_\_

9. Will these groups, listed in #8, need to sign a contract?       Yes       No

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Expected Revenues *(Please complete Schedule C on page 3.)*:..... **TOTAL:** \_\_\_\_\_

Expected Expenses (LCPAA has little seed money available.) (Pls see *Sch. D on pg 3.*).....**TOTAL:** \_\_\_\_\_

Expected Profit:.....**TOTAL:** \_\_\_\_\_

Report Submitted by *(Please print)*: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

Approved:     Yes       No      Date: \_\_\_\_\_      Copy to Treasurer \_\_\_\_\_

Signature: VP Fund Raising \_\_\_\_\_      Board President \_\_\_\_\_

Signature: Treasurer \_\_\_\_\_      PA Director \_\_\_\_\_



**C. List all expected revenues.**

Description	Amount / Percentage
	\$
<b>Total - agrees to first page</b>	<b>\$</b>

**D. List all expected expenditures.**

Description	Amount
	\$
<b>Total - agrees to first page</b>	<b>\$</b>

**Additional Information:**

Please describe the breakeven point of the fundraising project. For example, how many must be sold to cover the expenses in order that LCPAA does not incur a dollar loss?


Please provide any other information that you feel would be helpful to the evaluation.
