

MIGHTY RAM BAND FUNDRAISER

PERMISSION SLIP

AUTHORIZATION FOR STUDENT PARTICIPATION IN FUND RAISER

STUDENT NAME: (Please Print) _____

I give permission for my child to participate in the **MIGHTY RAM BAND** Entertainment passbook fundraiser. I assume responsibility for collection and returning all moneys due by the end of this fundraiser. I assume financial responsibility for any lost or damaged products*.

Date: _____

_____ (# of passbooks given) @ \$12.50 ea. Sell for \$25 each.

PARENT(S)/LEGAL GUARDIAN(S):

Name: (Print) _____

Address: _____

Home phone: _____ Work phone: _____

Cell phone: _____ Email: _____

Parent/Guardian Signature: _____

For information regarding the fund raiser contact:

Name: Sherry Buford _____

Cell Phone: 972-765-5102 _____

Email: Sherry.Bufford@att.net

**Passbooks not damaged or folded can be returned by end of fundraiser due date for full credit.*