London Lynx Ringette Association

www.londonringette.com

TEAM FUNDRAISING REQUEST FORM

TEAM: _____

DESCRIPTION OF FUNDRAISING REQUESTS: (include approximate start & end dates for the activity, location and all relevant information)

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Team Officials Signature: _____

Name: _____ Position: _____ Date: _____

Address: _____ Phone Number: _____

LRA EXECUTIVE REPLY

Your request has been: ☐ Approved ☐ Not Approved

Comments: _____

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