## Food Fundraiser Request Form

School Name:	
Name of Requesting Organization:	
Overanization Contact Information	
Organization Contact Information:(Representative)	(Phone/Cell #)
What will Be Sold:	
Does Food Meet Smart Snack Regulations?  Nutrition information must be attached for all food fundra  Nutrition calculator may be found at:  www.healthiergeneration.org/take_action/schools/snacks_and_bever	
Is this a request for an exemption to Smart Snack Regulations? (Only Three Exemptions allowed/per school/year)	Y/N
Duration of Fundraiser:	· · · · · · · · · · · · · · · · · · ·
(No more than 10 days allowed per exemption – specific s	sale dates must be listed)
No items may be sold 30 minutes before to 30 minutes after des	ignated lunch and breakfast serving perio
By Signing below I understand that our organization will abide by Competitive Foods Laws. Please submit to Nutrition Services Cennpoppie@sd27j.net	
Signature of Requestor	Date
Principal Signature of Approval	Date
Nutrition Services Office Signature of Approval	Date