Dufferin-Peel Catholic District School Board

Please complete the following form and submit to the office at least 2 weeks in advance for any upcoming events, trips or activities. The information below will be used to create the online item for parents to purchase for their students.
Catalogue items are not required for fundraisers where goods will not be received (eg. donations in lieu, awards, or dance-a-thons). All donations of this nature should be received through the online donation site.

| Title | Examples: <br> Apple Orchard Trip, Clothing Sale, <br> Sub Lunch Order <br> (150 Characters Max.) |  |
| :---: | :---: | :---: |
| Date(s), if applicable | Tuesday, Oct. 2, YYYY |  |
| Description <br> (To Be Posted For Parents) | Date, Time, <br> Bus Departs from school, Bus Returns to school, Pack a lunch, Rain or Shine, Destination and contact info. |  |
| Dates to Make Visible to parents | ASAP or Monday, Sept. 17, YYYY |  |
| Dates to Be Removed/Expire | Monday, Oct. 1, YYYY |  |
| Email Reminder to Parents | Date(s) of Reminder(s) before day of event |  |
| Quantity Available (Items, tickets, etc.) | Unlimited or fixed amount. Once \# has been bought they are sold out | $\square$ Unlimited Amount $\square$ Fixed Amount |
| Limit per person | Unlimited or fixed amount per person to purchase | $\square$ Unlimited Amount $\quad \square$ Fixed Amount |
| Available to the Public or Staff | Public allows anyone outside of the school can purchase | No $\square$ Public $\square$ Staff Only $\square$ Staff and Student Only |
| Recurring Payments | 1 time payment or equal value installments | $\square$ No Yes-How many installments |
| Student Attachments | Grade, Course Code, Homeroom, Sports Team, Group, Entire School |  |
| Total cost per Student <br> [A] | \$17.00 | \$ 0.00 |


| Submitted By: |  |
| :--- | :--- |
| Date Submitted to Office: |  |


| For Office Use Only |  |  |
| :---: | :---: | :---: |
| Deposit Bank Account |  | School Council <br> School Generated Funds |
| Deposit Category |  |  |
| Cost Recovery Amount Based Total Cost Per Student (2\%) [B] |  | \$ 0.00 |
| Subtotal Per Student (Total Cost + Cost Recovery) [A + B] |  | \$ 0.00 |
| Rounded Final Total Per Auto Cost Recovery Calculation |  |  |
| Catholic School Council |  | Date |
| Principal Approval |  | Date |

