

*This form must be returned with your signed contract*



## 2011 Scheduling Request Form



**Group Name:** \_\_\_\_\_  
**Coordinator Name:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_

**Please indicate your level and area of commitment below**

<b>Concession Stand Size</b>	
<input type="checkbox"/> 8 Person,	<input type="checkbox"/> 10 Person,

My group is interested in the selecting the following schedules to fundraise:

*\*\* The commitment must equal a MINIMUM of 10 games \*\**

<b>Option 1 - Per Homestand *</b>			
Please check the box indicating the homestands that you would prefer to fundraise			
<input type="checkbox"/>	APRIL	5, 6, 8, 9, 10, 11, 12, 13	<input type="checkbox"/>
<input type="checkbox"/>	APRIL	21, 22, 23, 24, 25, 26, 27	<input type="checkbox"/>
<input type="checkbox"/>	MAY	2, 3, 4, 6, 7, 8	<input type="checkbox"/>
<input type="checkbox"/>	MAY	18, 19, 20, 21, 22, 23, 24, 25	<input type="checkbox"/>
<input type="checkbox"/>	JUNE	2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12	<input type="checkbox"/>
<input type="checkbox"/>	JUNE	24, 25, 26, 27, 28, 29	<input type="checkbox"/>
<input type="checkbox"/>	JULY	14, 15, 16, 17	<input type="checkbox"/>
<input type="checkbox"/>	JULY / AUG	26, 27, 28, 29, 30, 31, 1, 2, 3	<input type="checkbox"/>
<input type="checkbox"/>	AUGUST	15, 16, 17, 18, 19, 20, 21	<input type="checkbox"/>
<input type="checkbox"/>	SEPTEMBER	2, 3, 4, 5, 6, 7	<input type="checkbox"/>
<input type="checkbox"/>	SEPTEMBER	16, 17, 18	<input type="checkbox"/>
<input type="checkbox"/>	SEPTEMBER	23, 24, 25, 26, 27, 28	<input type="checkbox"/>

<b>Option 2 - Specific day of the week *</b>						
Please check the box of the week that you would prefer to fundraise						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Mon</b>	<b>Tue</b>	<b>Wed</b>	<b>Thur</b>	<b>Fri</b>	<b>Sat</b>	<b>Sun</b>
4/11	4/5	4/6	4/21	4/8	4/9	4/10
4/25	4/12	4/13	5/19	4/22	4/23	4/24
5/2	4/26	4/27	6/2	5/6	5/7	5/8
5/23	5/3	5/4	6/9	5/20	5/21	5/22
6/6	5/24	5/18	7/14	6/3	6/4	6/5
6/27	6/7	5/25	7/28	6/10	6/11	6/12
8/1	6/28	6/8	8/18	6/24	6/25	6/26
8/15	7/26	6/29		7/15	7/16	7/17
+ 9/5	8/2	7/27		7/29	7/30	7/31
9/26	8/16	8/3		8/19	8/20	8/21
	9/6	8/17		9/2	9/3	9/4
	9/27	9/7		9/16	9/17	9/18
+ holiday		9/28		9/23	9/24	9/25

<b>Option 3 - Individual Games *</b>		
Please indicate the dates that you would prefer to fundraise		
Date	Date	Date
1 . / /	2 . / /	3 . / /
4 . / /	5 . / /	6 . / /
7 . / /	8 . / /	9 . / /
10 . / /	11 . / /	12 . / /
13 . / /	14 . / /	15 . / /
16 . / /	17 . / /	18 . / /
19 . / /	20 . / /	21 . / /

Group Leader Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_