

SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL

School	TCMS
Activity Account	Band
External Support/Booster Organization	
Name of Fundraiser	Century Resources
Sponsor	Carmichael
Date Submitted	7-9-13

Purpose of fundraising activity:

(What will the funds be used for? Be specific)

Funds will be used for instruments, school fees (for KMEA), supplies, music, and/or travel (student(s) and/or instructor).

Items to be sold:

Century Resources brochure → cheese/sausage + gifts/brochure

Beneficiary of fundraising activity:

(Who will receive the benefit of the funds)

TCMS Band

Date(s) scheduled:

August 12 (or ASAP following August BOE meeting)

Names of adult supervisors at activity (chaperones, custodians, etc.):

Carmichael

Athletic Fundraiser

Yes ☐No ☒

If yes, sport involved:

Corresponding sport participating in fundraiser?

Yes ☐No ☒

Coaches Signature (corresponding sport)

Date

Circle One:

Approved

Not Approved

Principal

Date

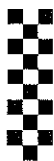
Date

SBDM Council (If Council Policy)

Date

Superintendent

Date



School	TCMS
Activity Account	Student Rewards
External Support/Booster Organization	
Name of Fundraiser	Dances
Sponsor	TCMS
Date Submitted	7-15-2013

Purpose of fundraising activity:

(What will the funds be used for? Be specific)

Student Rewards

Items to be sold:

Concessions  
gate

Beneficiary of fundraising activity:

(Who will receive the benefit of the funds)

Students

Date(s) scheduled:

August / October / December

Names of adult supervisors at activity (chaperones, custodians, etc.):

TCMS Administration 3 Staff

Athletic Fundraiser

Yes ☐ No ☐

If yes, sport involved:

Corresponding sport participating in fundraiser?

Yes ☐ No ☐

Coaches Signature (corresponding sport)

Date

Circle One:

Approved

Not Approved

Principal

Date 7-15-13

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

School	TOMS
Activity Account	GENERAL FUND
External Support/Booster Organization	
Name of Fundraiser	PICTURE DAY
Sponsor	TOMS
Date Submitted	7-15-2013

Purpose of fundraising activity:

(What will the funds be used for? Be specific)

GENERAL FUND for Students

Items to be sold:

PICTURES

Beneficiary of fundraising activity:

(Who will receive the benefit of the funds)

Students

Date(s) scheduled:

August / March

Names of adult supervisors at activity (chaperones, custodians, etc.):

TOMS Administration

Athletic Fundraiser

Yes ☐No ☐

If yes, sport involved:

Corresponding sport participating in fundraiser?

Yes ☐No ☐

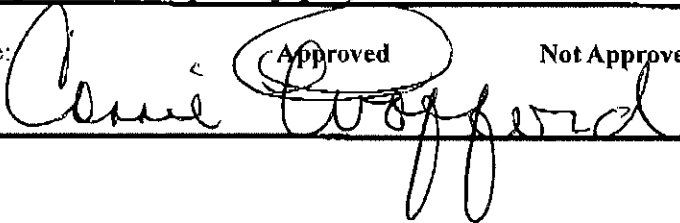
Coaches Signature (corresponding sport)

Date

Circle One:

Approved

Not Approved



Date

7-15-13

Principal

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date