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**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	TC Wrestling
External Support/Booster Organization	
Name of Fundraiser	Donations
Sponsor	Bryan Jones
Date Submitted	4/21/14

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Purchase a used mat for practice.

Items to be sold:
None - We will be asking for donations.

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
TC Wrestling Team

Date(s) scheduled:
Immediately until season begins.

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

Athletic Fundraiser	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
If yes, sport involved: Wrestling			
Corresponding sport participating in fundraiser?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
			4/28/14
Coaches Signature (corresponding sport)			Date

Circle One: Approved Not Approved


Principal Date 4-29-14

SBDM Council (If Council Policy) Date

Superintendent Date