

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCMS
Activity Account	Dance Team
External Support/Booster Organization	
Name of Fundraiser	L & R Soda Shop Donation Day
Sponsor	Katherine Power Cole
Date Submitted	4/24/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 Proceeds will be used to purchase new uniforms, shoes, etc for each girl on the dance team for the 2015-2016 school year.

Items to be sold:
 L & R Soda Shop will set a day for all ice cream proceeds to be donated to the Dance Team

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
 All TCMS dance team members for the 2015-2016 school year

Date(s) scheduled:
 Jun-15

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Katherine Power Cole and April Griffin

Athletic Fundraiser	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes, sport involved:		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Coaches Signature (corresponding sport) _____ Date _____

Circle One:

Approved

Not Approved

Principal

Date 4-26-15

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCMS
Activity Account	Dance Team
External Support/Booster Organization	
Name of Fundraiser	Car Decals
Sponsor	Katherine Power Cole
Date Submitted	4/24/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 Proceeds will be used to purchase new uniforms, shoes, etc for each girl on the dance team for the 2015-2016 school year.

Items to be sold:
 Car Decals

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
 All TCMS dance team members for the 2015-2016 school year

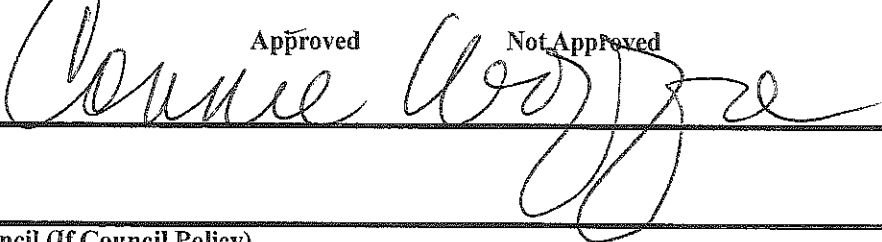
Date(s) scheduled:
 May 12, 2015 through after fall sports next school year 2015-2016

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Katherine Power Cole and April Griffin

Athletic Fundraiser	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes, sport involved:		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Coaches Signature (corresponding sport)	Date
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Circle One: Approved Not Approved

Principal  Date 4-26-15

SBDM Council (If Council Policy)	Date
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Superintendent	Date
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