

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Baseball
External Support/Booster Organization	
Name of Fundraiser	District Day Cookout
Sponsor	Matt Baker
Date Submitted	7/6/2015


Purpose of fundraising activity: (What will the funds be used for? Be specific)
To raise funds to purchase baseball supplies.

Items to be sold:
Pork Chops, Steak Sandwiches, Hamburgers, Hot Dogs, Chips, and Drinks

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
Baseball

Date(s) scheduled:
Fall

Names of adult supervisors at activity (chaperones, custodians, etc.):
Matt Baker
Chris Cole
Shonda Sammons

Athletic Fundraiser If yes, sport involved Baseball	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Corresponding sport participating in fundraiser? 	Yes <input type="checkbox"/> No <input type="checkbox"/> 7/6/15
Coaches Signature (corresponding sport)	Date

Circle One: Approved Not Approved


Principal Date 7/6/15

SBDM Council (If Council Policy) Date

Superintendent Date

No Restrictions - No students involved

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Girls Soccer
External Support/Booster Organization	
Name of Fundraiser	Lady Rebels Soccer Color Run
Sponsor	Offutt-price
Date Submitted	22-Jun-15

Purpose of fundraising activity: (What will the funds be used for? Be specific)

The purpose of this fundraiser is to raise money to pay for new jerseys and socks for the team.

Also to contribute to the scholarship given at the end of the season.

Items to be sold:

Spirit items (headbands, waterbottles, tshirts..)

The entry fee into the color run

Beneficiary of fundraising activity:

(Who will receive the benefit of the funds)

Girls Soccer Players

Date(s) scheduled:

Sept 2015 (presale in Aug)

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

Soccer Parents and Booster Members

Kim Wofford

Riann Offutt-Price

Ben Drummond

Athletic Fundraiser

Yes ☒

No ☐

If yes, sport involved: TCCHS Girls Soccer

Corresponding sport participating in fundraiser?

Yes ☐

No ☐

Riann M. Offutt-Price

6/20/2015

Coaches Signature (corresponding sport)

Date

Circle One:

Approved

Not Approved

Date

7/6/15

Principal

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

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**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Girls Soccer
External Support/Booster Organization	
Name of Fundraiser	Letters of support and spirit
Sponsor	Offutt-price
Date Submitted	22-Jun-15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 The purpose of this fundraiser is to raise money to pay for new jerseys and socks for the team.
 Also to contribute to the scholarship given at the end of the season.

Items to be sold:
 Donations of support from family and friends

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
 Girls Soccer Players

Date(s) scheduled:
 Aug/Sept/oct 2015 -sales

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Soccer Parents and Booster Members
 Kim Wofford
 Riann Offutt-Price
 Ben Drummond

Athletic Fundraiser	Yes	<input checked="" type="checkbox"/>	No
If yes, sport involved: TCCHS Girls Soccer			
Corresponding sport participating in fundraiser?	Yes	<input type="checkbox"/>	No
Riann M. Offutt-Price			6/20/2015
Coaches Signature (corresponding sport)			Date

Circle One: **Approved** **Not Approved**


 Principal

Date
 7/6/15
 Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	TC QB Club
External Support/Booster Organization	
Name of Fundraiser	Powder Puff
Sponsor	Bryan Jones
Date Submitted	6/19/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Pay for pregame, post-game meals.

Items to be sold:
Hold a powder puff tournament during homecoming week. We will charge participants \$5, sell concessions at the games and a small gate entry fee.


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

Date(s) scheduled:
The week prior to homecoming and homecoming week.

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

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

Circle One: Approved Not Approved


Principal

Date
7/6/15
Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	TC QB Club
External Support/Booster Organization	
Name of Fundraiser	Youth Camp
Sponsor	Bryan Jones
Date Submitted	6/19/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Pay for pregame, post-game meals.

Items to be sold:

Hold a one day camp for youth football players the first Saturday after school has started back. If weather is bad we will postpone one week.

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

Date(s) scheduled:
Aug-15

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

Bryan Jones

Shannon Cole

Kelli Penick

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

Circle One:

Approved

Not Approved


Principal

Date
7/6/15
Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	TC QB Club
External Support/Booster Organization	
Name of Fundraiser	Helmet Drive
Sponsor	Bryan Jones
Date Submitted	6/18/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Pay for pregame, post-game meals.

Items to be sold:
Ask for donations on square during a Bike Night.


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

Date(s) scheduled:
Immediately through start of football season.

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

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

Circle One: **Approved** **Not Approved**


Principal

Date
7/6/15
Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	TC QB Club
External Support/Booster Organization	
Name of Fundraiser	Discount Card
Sponsor	Bryan Jones
Date Submitted	5/16/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Pay for equipment, cleats, etc.

Items to be sold:
Sell discount cards for area businesses.

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

Date(s) scheduled:
Immediately through 2015-2016 school year.

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

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

Circle One: **Approved** **Not Approved**


Principal

Date
7/6/15
Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	TC QB Club
External Support/Booster Organization	
Name of Fundraiser	100 Man Club
Sponsor	Bryan Jones
Date Submitted	6/15/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Pay for pregame, post-game meals.

Items to be sold:
Sell Memberships to the 100 Man Club


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

Date(s) scheduled:
Immediately through start of football season.

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

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

Circle One: **Approved** **Not Approved**

 Principal	Date <u>7/6/15</u>
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SBDM Council (If Council Policy)	Date
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Superintendent	Date
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**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	TC QB Club
External Support/Booster Organization	
Name of Fundraiser	Donation Letters
Sponsor	Bryan Jones
Date Submitted	6/15/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Pay for player packs (shirts, shorts, etc.)

Items to be sold:
Sell TC Shirts, Hats, Hoodies, etc.

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

Date(s) scheduled:
Immediately through 2015 football season.

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

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

Circle One: **Approved** **Not Approved**



Principal

Date
7/6/15

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	TC QB Club
External Support/Booster Organization	
Name of Fundraiser	Fence Signs
Sponsor	Bryan Jones
Date Submitted	6/15/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Pay for pregame, post-game meals.

Items to be sold:
Advertisement signs for football field fence.


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

Date(s) scheduled:
Immediately through football season.

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

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

Circle One: Approved Not Approved

 _____ Date 7/6/15

Principal _____ Date _____

SBDM Council (If Council Policy) _____ Date _____

Superintendent _____ Date _____

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	TC QB Club
External Support/Booster Organization	
Name of Fundraiser	Spirit Gear
Sponsor	Bryan Jones
Date Submitted	6/15/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Pay for player packs (shirts, shorts, etc.)

Items to be sold:
Sell TC Shirts, Hats, Hoodies, etc.

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

Date(s) scheduled:
Immediately through 2015-2016 school year.

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

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

Circle One:

Approved

Not Approved


Principal

Date

7/6/15
Date

SBDM Council (If Council Policy)

Date

Superintendent

Date