| School | TCCHS | | | |
|--|---|-----|------|----|
| Activity Account | TCCHS Cheerleaders | | | |
| External Support/Booster Organization | School-wide | | | |
| Name of Fundraiser | TCCHS Sports program 2015-2016 yea | r | | |
| Sponsor | Tina Marshall | | | |
| Date Submitted | 8/3/2015 | | | |
| Purpose of fundraising activity: funds will be divided between cheerleading and | (What will the funds be used for? Be specific d the football team |) | | |
| Items to be sold: sport programs | | | | |
| Beneficiary of fundraising activity: cheerleaders and football players | (Who will receive the benefit of the funds) | | | |
| Names of adult supervisors at activity (chaper Tina Marshall and Bryan Jones | ones, custodians, etc.): | | | |
| Athletic Fundraiser | | Yes | x | No |
| If yes, sport involved: Corresponding sport participating in fundrais | er? | Yes | x | No |
| Coaches Signature (corresponding sport) | | | Date | |
| Circle One: Approved Principal | Not Approved | | Date | |
| 0 | | | | |
| SBDM Council (If Council Policy) | | | Date | |
| Superintendent | | | Date | |

| School | TCCHS | | | |
|---|--|-----|-----------|------|
| Activity Account | Student Council | | | |
| External Support/Booster Organization | | | | |
| Name of Fundraiser | Homecoming Dance | | | |
| Sponsor | Bristow | | | |
| Date Submitted | 7/31/15 | | | |
| Purpose of fundraising activity: Funds from the homecoming dance are used for | (What will the funds be used for? Be specifi r activities for students at TCCHS and Angel Tre | | ion. | |
| Items to be sold: Dance Tickets | | | | |
| Beneficiary of fundraising activity: Student Council | (Who will receive the benefit of the funds) | 300 | | |
| | | | | |
| Names of adult supervisors at activity (chapero L. Bristow, J. Pope, T. Wood, M. Baker, F. | nes, custodians, etc.): | | | |
| Athletic Fundraiser If yes, sport involved: | | Yes | | No X |
| Corresponding sport participating in fundraise | r? | Yes | | No X |
| Coaches Signature (corresponding sport) | | | Date | |
| Circle One: Approved Principal | Not Approved | | Date Date | |
| SBDM Council (If Council Policy) | | | Date | |
| Superintendent | | | Date | |

| School | TCCHS | | | | |
|--|---|------------|-----------|----------|--|
| Activity Account | Softball | | | | |
| External Support/Booster Organization | | | | | |
| Name of Fundraiser | CO ED Tournament | | | | |
| Sponsor | Bristow | | | | |
| Date Submitted | 7/31/15 | | | | |
| Purpose of fundraising activity: Funds from the softball CO ED tournament are u | (What will the funds be used for? Be specificused for supplies and equipment for the softball | | | | |
| Items to be sold: Gate Tickets and Concessions | | | | | |
| Beneficiary of fundraising activity: TCCHS Softball | (Who will receive the benefit of the funds) | | | (0) | |
| Date(s) scheduled: 1-Oct-15 Names of adult supervisors at activity (chaperone L. Bristow | | | | | |
| Athletic Fundraiser If yes, sport involved: Corresponding sport participating in fundraiser? | | Yes Yes | X | No No | |
| Coaches Signature (corresponding sport) | | | Date | | |
| | | | Date | | |
| Circle One: Approved Principal | Not Approved | | Date Date | | |
| SBDM Council (If Council Policy) | | | Date | | |
| Superintendent | | | Date | | |

| School | TCCHS | | | | |
|--|---|------------|-----------|----------|---|
| Activity Account | Softball | | | | |
| External Support/Booster Organization | | | | | |
| Name of Fundraiser | Donations | | | | |
| Sponsor | Bristow | | | | |
| Date Submitted | 7/31/15 | | | | |
| Purpose of fundraising activity: Funds from donations are used for supplies and | (What will the funds be used for? Be spec equipment for the softball team. | ific) | | _ | |
| Items to be sold: Asking for monetary donations from families, fr | iends, and businesses | | | | |
| Beneficiary of fundraising activity: TCCHS Softball | (Who will receive the benefit of the funds) |) | | | |
| Date(s) scheduled: September 2015 Names of adult supervisors at activity (chaperone L. Bristow | es, custodians, etc.): | | | | |
| Athletic Fundraiser If yes, sport involved: Corresponding sport participating in fundraiser: | ? | Yes Yes | X Y | No No | : |
| Coaches Signature (corresponding sport) | | | Date | | |
| Circle One: Approved Prinkipal | Not Approved | | Date Date | | |
| SBDM Council (If Council Policy) | | | Date | | |
| Superintendent | | | Date | | |

| School | TCCHS | | | | |
|---|--|-----|-----------|----|--|
| Activity Account | Softball | | | | |
| External Support/Booster Organization | | | | | |
| Name of Fundraiser | Meat Sales | | | | |
| Sponsor | Bristow | | | | |
| Date Submitted | 7/31/15 | | | | |
| Purpose of fundraising activity: Funds from the softball meat sales are used for | (What will the funds be used for? Be specific supplies and equipment for the softball team. | e) | | | |
| Items to be sold: Boston Butts and Ribs | | | | | |
| Beneficiary of fundraising activity: TCCHS Softball | (Who will receive the benefit of the funds) | | | | |
| Date(s) scheduled: February/March 2016 Names of adult supervisors at activity (chaperon L. Bristow | | | | | |
| Athletic Fundraiser | A SECRETARIA DE LA CONTRACTOR DE LA CONT | Yes | X | No | |
| If yes, sport involved: Corresponding sport participating in fundraises HIGHELLE BUSTON | r? | Yes | X | No | |
| Coaches Signature (corresponding sport) | | | Date | | |
| Circle One: Approved Principal | Not Approved | | Date Date | | |
| i i i i i i i i i i i i i i i i i i i | | | | | |
| SBDM Council (If Council Policy) | | | Date | | |
| Superintendent | | | Date | | |