

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

School	Todd County Central High School
Activity Account	
External Support/Booster Organization	TCA
Name of Fundraiser	Banners
Sponsor	Steven McGhee
Date Submitted	9/11/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 These funds are to be used to help purchase travel suits, shoes, and t-shirts for the team.

Items to be sold:
 Banners to business and ads in the basketball program.

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
 Girl's Basketball

Date(s) scheduled:
 September (whole month)

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Steven McGhee
 Holly Simons
 Andrea Milkowski

Athletic Fundraiser	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
If yes, sport involved: Girl's Basketball				
Corresponding sport participating in fundraiser?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Boy's Basketball				
Coaches Signature (corresponding sport)	Steven McGhee	 Date		

Circle One: Approved Not Approved

 Principal	Date _____ Date _____
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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	
External Support/Booster Organization	TCA
Name of Fundraiser	Banners
Sponsor	BOY'S BASKETBALL
Date Submitted	9/11/15

Purpose of fundraising activity:

TO RAISE FUNDS FOR BOY'S BASKETBALL TO BE USED FOR EQUIPMENT, MEALS, SNACKS, APPAR TRAVEL, TEAM SUMMER CAMPS, ETC.

Items to be sold:

Vinyl banners and Programs for businesses and parents who support Todd County Basketball

Beneficiary of fundraising activity:

TCCHS BOY'S BASKETBALL TEAM

Date(s) scheduled:


Sept. 2015

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

Head Coach: Chris Sullivan

Assistant Coaches: Eric Davie, Seth McReynolds, & Robbie Weathers

Parents

Athletic Fundraiser	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes, sport involves BOY'S BASKETBALL	
Corresponding sport participating in fundraiser?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	9/11/15
Coaches Signature (corresponding sport)	Date

Circle One:

Approved

Not Approved

Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent (If School-Wide Fundraiser)

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	
External Support/Booster Organization	TCA
Name of Fundraiser	LETTER/DONATION CAMPAIGN
Sponsor	BOY'S BASKETBALL
Date Submitted	9/11/15

Purpose of fundraising activity:

TO RAISE FUNDS FOR BOY'S BASKETBALL TO BE USED FOR EQUIPMENT, MEALS, SNACKS, APPAREL TRAVEL, TEAM SUMMER CAMPS, ETC.

Items to be sold:

DONATIONS WILL BE ACCEPTED

Beneficiary of fundraising activity:

TCCHS BOY'S BASKETBALL TEAM

Date(s) scheduled:

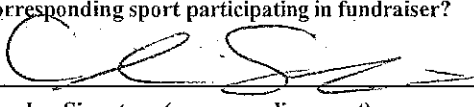
FALL 2015

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

Head Coach: Chris Sullivan

Assistant Coaches: Eric Davie, Seth McReynolds, & Robbie Weathers

Kevin Harris

Athletic Fundraiser	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes, sport involved BOY'S BASKETBALL	
Corresponding sport participating in fundraiser?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	9/11/15
Coaches Signature (corresponding sport)	Date

Circle One:

Approved

Not Approved

Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent (If School-Wide Fundraiser)

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	
External Support/Booster Organization	TCA
Name of Fundraiser	BASKETBALL CAMP
Sponsor	BOY'S BASKETBALL
Date Submitted	9/11/15

Purpose of fundraising activity:

TO RAISE FUNDS FOR BOY'S BASKETBALL TO BE USED FOR EQUIPMENT, MEALS, SNACKS, CLOTHI
TRAVEL, GAMES, ETC.

Items to be sold:

N/A

Beneficiary of fundraising activity:

TCCHS BOY'S BASKETBALL


Date(s) scheduled:

June 2016

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

Head Coach: Chris Sullivan

Assistant Coaches: Eric Davie, Seth McReynolds, & Robbie Weathers

Athletic Fundraiser	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes, sport involved BOY'S BASKETBALL	
Corresponding sport participating in fundraiser?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	9/11/15
Coaches Signature (corresponding sport)	Date

Circle One:

Approved

Not Approved

Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent (If School-Wide Fundraiser)

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	T
External Support/Booster Organization	TCA
Name of Fundraiser	1st Annual Car Wash
Sponsor	BOY'S BASKETBALL
Date Submitted	9/11/15

Purpose of fundraising activity:

TO RAISE FUNDS FOR BOY'S BASKETBALL TO BE USED FOR EQUIPMENT, MEALS, SNACKS, APPAREL TRAVEL, TEAM SUMMER CAMPS, ETC.

Items to be sold:

Food, Drinks, Snacks, Donations will be accepted

Beneficiary of fundraising activity:

TCCHS BOY'S BASKETBALL TEAM

Date(s) scheduled:

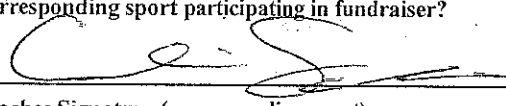
Oct ~~15~~ 2015

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

Head Coach: Chris Sullivan

Assistant Coaches: Eric Davie, Seth McReynolds, & Robbie Weathers

Parents

Athletic Fundraiser	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes, sport involved BOY'S BASKETBALL	
Corresponding sport participating in fundraiser?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	9/11/15
Coaches Signature (corresponding sport)	Date

Circle One:

Approved

Not Approved

Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent (If School-Wide Fundraiser)

Date

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

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School	TCCHS
Activity Account	
External Support/Booster Organization	TCA
Name of Fundraiser	Lady Rebels Soccer Color Run
Sponsor	Offutt-price
Date Submitted	9/11/15

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

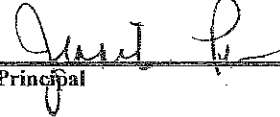
Ben Drummond

Athletic Fundraiser	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If yes, sport involved: TCCHS Girls Soccer		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Riann M. Offutt-Price	9/11/15	
Coaches Signature (corresponding sport)	Date	

Circle One:

Approved

Not Approved


Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

School	TCCHS
Activity Account	
External Support/Booster Organization	TCA
Name of Fundraiser	Lady Rebel Softball Tournament
Sponsor	Bristow
Date Submitted	9/11/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 Funds from the Lady Rebel Softball tournament are used for supplies and equipment for the softball team.

Items to be sold:
 Concessions/Gate Tickets

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

Date(s) scheduled:
~~March 19, 2016~~ March 19, 2016

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

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 checked="" type="checkbox"/>
<i>Heigh Ellen Bristow</i>		
Coaches Signature (corresponding sport)	Date 9/11/15	

Circle One: Approved Not Approved

Jenail Per
 Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

✓

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

School	TCCHS
Activity Account	
External Support/Booster Organization	TCA
Name of Fundraiser	Little Debbie Sales
Sponsor	Bristow
Date Submitted	9/11/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 Funds from the softball Little Debbie Sales are used for supplies and equipment for the softball team.

Items to be sold:
 Little Debbies cakes/snacks

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

Date(s) scheduled:
 September/October 2015

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

Athletic Fundraiser If yes, sport involved:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Corresponding sport participating in fundraiser? <i>High School Bristow</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Coaches Signature (corresponding sport)	Date 9/11/15

Circle One: Approved Not Approved

[Signature]
 Principal

_____ Date

_____ Date

SBDM Council (If Council Policy)

_____ Date

Superintendent

_____ Date

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

School	TCCHS
Activity Account	
External Support/Booster Organization	TCA
Name of Fundraiser	T Shirts/Apparel
Sponsor	Bristow
Date Submitted	9/11/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Funds from T-Shirts/Apparel are used for supplies and equipment for the softball team.

Items to be sold:
Todd County T shirts/Apparel or Todd County Central Softball T-Shirts/Apparel

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

Date(s) scheduled:
September/October 2015
February/March 2016

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

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 checked="" type="checkbox"/>	
<i>High School Bristow</i>			9/11/15
Coaches Signature (corresponding sport)			Date

Circle One:

Approved

Not Approved

Date

Principal

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

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School	TCCHS
Activity Account	
External Support/Booster Organization	TCA
Name of Fundraiser	Signs
Sponsor	Bristow
Date Submitted	9/11/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Funds from the softball sign sales are used for supplies and equipment for the softball team.

Items to be sold:
Signs to go on the fence at the softball field

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

Date(s) scheduled:
September, 2015

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

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 checked="" type="checkbox"/>
<i>High School Bristow</i>		
Coaches Signature (corresponding sport)	Date 9/11/15	

Circle One: Approved Not Approved

Just Per
Principal

_____ Date

_____ Date

SBDM Council (If Council Policy)

_____ Date

Superintendent

_____ Date

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

School	TCCHS
Activity Account	
External Support/Booster Organization	TCA
Name of Fundraiser	CO ED Tournament
Sponsor	Bristow
Date Submitted	9/11/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 Funds from the softball CO ED tournament are used for supplies and equipment for the softball team.

Items to be sold:

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

Date(s) scheduled:
 1-Oct-15

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

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 checked="" type="checkbox"/>
<i>Keith Allen Bristow</i>		
Coaches Signature (corresponding sport)	9/11/15 Date	

Circle One:

Approved

Not Approved

Jenna Per
Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

✓

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

School	TCHS
Activity Account	
External Support/Booster Organization	TCA
Name of Fundraiser	Donations
Sponsor	Bristow
Date Submitted	9/11/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 Funds from donations are used for supplies and equipment for the softball team.

Items to be sold:

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

Date(s) scheduled:
 September, 2015

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

Athletic Fundraiser If yes, sport involved:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Corresponding sport participating in fundraiser? <i>High School Softball</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Coaches Signature (corresponding sport) <i>[Signature]</i>	Date 9/11/15

Circle One:

Approved

Not Approved

[Signature]
 Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

✓

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

School	TCCHS
Activity Account	
External Support/Booster Organization	TCA
Name of Fundraiser	Meat Sales
Sponsor	Bristow
Date Submitted	9/11/15

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 Funds from the softball meat sales are used for supplies and equipment for the softball team.

Items to be sold:

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

Date(s) scheduled:
 February/March, 2016

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

Athletic Fundraiser If yes, sport involved:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Corresponding sport participating in fundraiser? <i>Heigh Ellen Bristow</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Coaches Signature (corresponding sport)	Date 9/11/15

Circle One: Approved Not Approved

Jenifer Per
 Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date