

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCMS
Activity Account	Academic Team
External Support/Booster Organization	
Name of Fundraiser	Sunglasses/Hat Day
Sponsor	Lisa Porter
Date Submitted	5/29/2016

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Annual fees to compete, equipment, awards for students, t-shirts and supplies.

Items to be sold:
Students will pay one dollar to be able to wear a hat and one dollar to wear sunglasses during the school day.

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
TCMS Academic Team

Date(s) scheduled:
2016-17 School Year

Names of adult supervisors at activity (chaperones, custodians, etc.):
Lisa Porter, Nikki Andrews and Marla Gillespie

Athletic Fundraiser	Yes <input type="checkbox"/>	No <input 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 [Signature] Date 6-21-16

SBDM Council (If Council Policy) Date

Superintendent Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCMS
Activity Account	Academic Team
External Support/Booster Organization	
Name of Fundraiser	Movie Day with Concessions
Sponsor	Lisa Porter
Date Submitted	5/29/2016

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Annual fees to compete, equipment, awards for students, t-shirts and supplies.

Items to be sold:
Movie passes, popcorn, candy, and drinks.

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
TCMS Academic Team

Date(s) scheduled:
2016-17 School Year

Names of adult supervisors at activity (chaperones, custodians, etc.):
Lisa Porter, Nikki Andrews and Marla Gillespie

Athletic Fundraiser	Yes <input type="checkbox"/>	No <input 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

6-21-16

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date