

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

School	TCCHS
Activity Account	Athletics
External Support/Booster Organization	
Name of Fundraiser	TCCHS Athletic 500
Sponsor	Marnie Broady, AD
Date Submitted	27-Jul-16

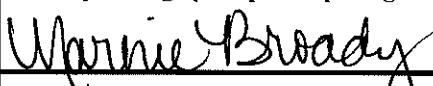
Purpose of fundraising activity: (What will the funds be used for? Be specific)
To raise funds to help with the cost of transportation and equipment for TCCHS Athletics

Items to be sold:
Tickets/Chances for money
Meal

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
All Athletic Teams

Date(s) scheduled:
5-Nov-16


Names of adult supervisors at activity (chaperones, custodians, etc.):
Marnie Broady, AD
Deatrik Kinney, Assistant Principal
Jennifer Pope, Principal

Athletic Fundraiser	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
If yes, sport involved All Athletic Teams				
Corresponding sport participating in fundraiser?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	7/27/2016			
Coaches Signature (corresponding sport)	Date			

Circle One: Approved Not Approved


Principal

Date
7/27/2016
Date

SBDM Council (If Council Policy)

Superintendent

Date
7/27/16
Date

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

School	Todd County Central High School
Activity Account	Cheer
External Support/Booster Organization	
Name of Fundraiser	selling Dippin' Dots at sports events
Sponsor	Contessa Orr & Amber Gant
Date Submitted	8/2/2016

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

The funds from this activity will be used to purchase new poms, signs, apparel and other cheer supplies

Items to be sold:

3 oz bags of Dippin' Dots will be sold at sporting events (football, basketball games, etc)

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

TCCHS Cheer Squad

Date(s) scheduled:

8/19/16-5/20/17

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

Contessa Orr, Amber Gant


Athletic Fundraiser	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
If yes, sport involved:				
Corresponding sport participating in fundraiser?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Contessa Orr, Amber Gant	8/2/2016			
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**

Yes

School	TCCHS
Activity Account	Class of 2018
External Support/Booster Organization	
Name of Fundraiser	Prom
Sponsor	Riann Price
Date Submitted	August 2 2016

Purpose of fundraising activity: (What will the funds be used for? Be specific)
To raise money to hold TCCHS 2017 Prom

Items to be sold:
Prom tickets

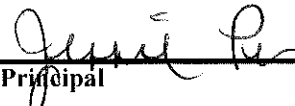
Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
All TCCHS students attending 2017 Prom

Date(s) scheduled:
1-Apr-17

Names of adult supervisors at activity (chaperones, custodians, etc.):
Riann Price
All Junior Class sponsors

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 <hr/> Date <hr/>
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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	Junior Class - Class of 2018
External Support/Booster Organization	
Name of Fundraiser	Great American Fundraiser
Sponsor	Riann Price
Date Submitted	August 2 2016

Purpose of fundraising activity: (What will the funds be used for? Be specific)
To raise funds to hold TCCHS 2017 Prom

Items to be sold:
Great American fundraiser items/candy/gifts

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
All TCCHS students attending 2017 Prom

Date(s) scheduled:
Fall 2016/winter 2017

Names of adult supervisors at activity (chaperones, custodians, etc.):
Riann Price
All Junior Class sponsors

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

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

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**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	Todd County Central High School
Activity Account	PTO
External Support/Booster Organization	
Name of Fundraiser	Miss TCCHS Pageant
Sponsor	PTO
Date Submitted	July, 2016

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

Raise money for student and teacher needs for the 2016 - 2017 school year.

Items to be sold:

admission tickets (adults - \$3.00; students - \$1.00; ages 5 and under - FREE)

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

TCCHS students and teachers

Date(s) scheduled:

Saturday, October 15, 2016

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

Faye Turnbaugh, Janet Smith, Melissa Morgan

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

Date

Principal

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	PTO
External Support/Booster Organization	
Name of Fundraiser	2016 Veteran's Program Essay
Sponsor	PTO
Date Submitted	1-Jul-16

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

Reward (2) winners of PTO sponsored essay contest - Veteran's Appreciation Week

TCCHS 1st place - \$150.00; 2nd place - \$75.00

Items to be sold:

N/A

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

Two winners from TCCHS (Students)

Essay: Interview a Veteran: Their personal story about depending liberty & freedom (500 words)

Date(s) scheduled:

September 19th - October 7th (Winner will be announced Tuesday, October 19th)

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

Faye Turnbaugh

Janet Smith

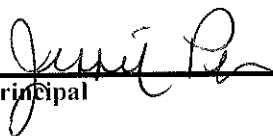
Melissa Morgan

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

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School	TCCHS
Activity Account	BOY'S SOCCER
External Support/Booster Organization	
Name of Fundraiser	SODA SHOP FUNDRAISER
Sponsor	BOY'S SOCCER
Date Submitted	<i>7-18-16</i>

Purpose of fundraising activity:

TO RAISE FUNDS FOR BOY'S SOCCER TO BE USED FOR EQUIPMENT, UNIFORMS, TRAVEL, ETC.

Items to be sold:

ICE CREAM, FOOD ETC.

Beneficiary of fundraising activity:

TCCHS BOY'S SOCCER TEAM

Date(s) scheduled:

FALL 2016

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

JILL HARRIS, CINDY LAW, TONI HENDERSON, AMY STOOKSBURY

Athletic Fundraiser If yes, sport involved BOY'S SOCCER	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Corresponding sport participating in fundraiser? <i>[Signature]</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> <i>7-18-16</i>
Coaches Signature (corresponding sport)	Date

Circle One:

Approved

Not Approved

[Signature]
Principal

Date

7/18/16
Date

SBDM Council (If Council Policy)

Date

Superintendent (If School-Wide Fundraiser)

Date

1/1

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	BOY'S SOCCER
External Support/Booster Organization	
Name of Fundraiser	LETTER/DONATION CAMPAIGN
Sponsor	BOY'S SOCCER
Date Submitted	7-18-16

Purpose of fundraising activity:

TO RAISE FUNDS FOR BOY'S SOCCER TO BE USED FOR EQUIPMENT, UNIFORMS, TRAVEL, ETC.

Items to be sold:

DONATIONS WILL BE ACCEPED

Beneficiary of fundraising activity:


TCCHS BOY'S SOCCER TEAM

Date(s) scheduled:

FALL 2016

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

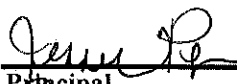
JILL HARRIS, CINDY LAW, TONI HENDERSON, AMY STOOKSBURY

Athletic Fundraiser	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If yes, sport involved BOY'S SOCCER		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	7-18-16	
Coaches Signature (corresponding sport)	Date	

Circle One:

Approved

Not Approved


Principal

Date

7/18/16

Date

SBDM Council (If Council Policy)

Date

Superintendent (If School-Wide Fundraiser)

Date

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**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCHS
Activity Account	BOY'S SOCCER
External Support/Booster Organization	
Name of Fundraiser	KRISPY KREME DOUGHNUTS
Sponsor	BOY'S SOCCER
Date Submitted	7-8-16

Purpose of fundraising activity:

TO RAISE FUNDS FOR BOY'S SOCCER TO BE USED FOR EQUIPMENT, UNIFORMS, TRAVEL, ETC.

Items to be sold:

KRISPI KREME DOUGHNUTS

Beneficiary of fundraising activity:


TCHS BOY'S SOCCER TEAM

Date(s) scheduled:

FALL 2016

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


JILL HARRIS, CINDY LAW, TONI HENDERSON, AMY STOOKSBURY

Athletic Fundraiser	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If yes, sport involved BOY'S SOCCER		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	7-18-16	
Coaches Signature (corresponding sport)	Date	

Circle One:

Approved

Not Approved


Principal

Date

7-18-16

Date

SBDM Council (If Council Policy)

Date

Superintendent (If School-Wide Fundraiser)

Date

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**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	BOY'S SOCCER
External Support/Booster Organization	
Name of Fundraiser	MUM SALES
Sponsor	BOY'S SOCCER
Date Submitted	7-18-16

Purpose of fundraising activity:

TO RAISE FUNDS FOR BOY'S SOCCER TO BE USED FOR EQUIPMENT, UNIFORMS, TRAVEL, ETC.

Items to be sold:

MUMS

Beneficiary of fundraising activity:

TCCHS BOY'S SOCCER TEAM

Date(s) scheduled:

FALL 2016

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

JILL HARRIS, CINDY LAW, TONI HENDERSON, AMY STOOKSBURY

Athletic Fundraiser

Yes ☒ No ☐

If yes, sport involved: BOY'S SOCCER

Corresponding sport participating in fundraiser?

Yes ☐ No ☐

Coaches Signature (corresponding sport)

Date

Circle One:

Approved

Not Approved

Date

Principal

Date

SBDM Council (If Council Policy)

Date

Superintendent (If School-Wide Fundraiser)

Date

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**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Girls Soccer
External Support/Booster Organization	
Name of Fundraiser	Cookie Dough
Sponsor	Offutt-price
Date Submitted	2 Aug 16

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 The purpose of this fundraiser is to raise money for the girls soccer players to attend Lords of Soccer camp in July.
 This will help with team bonding and soccer skills.

Items to be sold:
 Premade cookie dough

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

Date(s) scheduled:
 Sales: Fall 2016

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

Athletic Fundraiser	Yes <input checked="" type="checkbox"/>
If yes, sport involved: TCCHS Girls Soccer	
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>
Riann M. Offutt-Price	
Coaches Signature (corresponding sport)	

Circle One: **Approved** **Not Approved** _____ **Date**

 _____
 Principal

SBDM Council (If Council Policy)

Superintendent

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**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Girls Soccer
External Support/Booster Organization	
Name of Fundraiser	Mums Sales
Sponsor	Offutt-price
Date Submitted	2 Aug-16

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 schola

Items to be sold:
 Mums

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

Date(s) scheduled:
 August 2015 -sales
 Sept 2015- delivered

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

Athletic Fundraiser	Yes <input checked="" type="checkbox"/>
If yes, sport involved: TCCHS Girls Soccer	
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>
Riann M. Offutt-Price	
Coaches Signature (corresponding sport)	

Circle One: **Approved** **Not Approved** _____ **Date**

 _____
 Principal

SBDM Council (If Council Policy)

Superintendent

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

Handwritten initials

School	TCCHS
Activity Account	Girls Soccer
External Support/Booster Organization	
Name of Fundraiser	Old Uniform sales
Sponsor	Offutt-price
Date Submitted	13-Jul-16

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 The purpose of this fundraiser is to raise money camp despoit and to pay for new unifroms that were purchased this year.
 Also to contribute to the scholarship given at the end of the season.

Items to be sold:
 old uniform shorts

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

Date(s) scheduled:
 August and Sept 2016 -sales

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Soccer Parents and Booster Members

Riann Offutt-Price
Katie Covington

Athletic Fundraiser If yes, sport involved: TCCHS Girls Soccer	Yes <input checked="" type="checkbox"/>
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>
Riann M. Offutt-Price	
Coaches Signature (corresponding sport)	

Circle One: **Approved** **Not Approved** _____ **Date**

Handwritten signature

Principal

SBDM Council (If Council Policy)

Superintendent

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Yearbook
External Support/Booster Organization	
Name of Fundraiser	Yearbook
Sponsor	Natajassa Clark
Date Submitted	Aug 2 2016

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Yearbook Sales for the 2016-2017 school year - funds will be used to pay Josten's for the 2016-2017 yearbook

Items to be sold:
Yearbooks, Senior Ads, Business Ads


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

Date(s) scheduled:
For the school year 2016-2017

Names of adult supervisors at activity (chaperones, custodians, etc.):
Natajassa Clark
Jennifer Pope

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

Circle One: **Approved** **Not Approved** _____ **Date**


 _____ **Principal** _____ **Date**

_____ **SBDM Council (If Council Policy)** _____ **Date**

_____ **Superintendent** _____ **Date**

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**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	Todd County Central High School
Activity Account	Youth Services Center High School Account
External Support/Booster Organization	
Name of Fundraiser	Salvavidas Training Agency
Sponsor	Kelli Templeman/Maurice Weatherspoon
Date Submitted	7/12/16

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 To teach/certify all students taking P.E./Health in CPR and first aid by the American Heart Association training guidelines. Salvavidas Training Agency will train all students during their class for one day.

Items to be sold:
 Donations will be accepted


Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
 Salvavidas Training Agency/Maurice Weatherspoon

Date(s) scheduled:
 Wednesday, November 2, 2016

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Maurice Weatherspoon, PE teacher

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"/>
Kelli Templeman	7/12/16	
Coaches Signature (corresponding sport)	Date	

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

 Principal	Date _____ Date _____ Date _____ Date _____
SBDM Council (If Council Policy)	
Superintendent	