

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

VW

School	TCCHS
Activity Account	Athletics: Track & Field
External Support/Booster Organization	N/A
Name of Fundraiser	Track & Field
Sponsor	Jessica Newport & Amanda Kennedy
Date Submitted	January 26th, 2017

Purpose of fundraising activity: (What will the funds be used for? Be specific)
This fundraiser is to make money for the entry fees at track meets.

Items to be sold:
T-shirts and warmups.

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
If any funds are collected from this fundraiser, they will go to the track team.

Date(s) scheduled:
February 2017 - March 2017

Names of adult supervisors at activity (chaperones, custodians, etc.):
Jessica Newport & Amanda Kennedy

Athletic Fundraiser	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If yes, sport involved: Track & Field		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<i>Jessica Newport</i>		
Coaches Signature (corres Jessica Newport & Amanda Kennedy	<u>1-26-17</u>	Date ##

Circle One: Approved Not Approved

[Signature]
Principal

_____ Date

_____ Date

SBDM Council (If Council Policy)

_____ Date

Superintendent

_____ Date

4/20

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Boy's Baseball
External Support/Booster Organization	
Name of Fundraiser	Pork Chop Lunch
Sponsor	Billy Killebrew/Melissa Weathers
Date Submitted	23-Jan-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
To raise money for baseball season. Including but not limited to equipment, travel, food, and any other supplies
needed for the season

Items to be sold:
Grilled pork chops/chips/dessert/drink

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

Date(s) scheduled:
March 31, 2017 (Friday before spring break)

Names of adult supervisors at activity (chaperones, custodians, etc.):
Billy Killebrew
Josh Popplewell
Scott Smith
Melissa Weathers

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 1/23/17
Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

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School	TCCHS
Activity Account	Project Graduation
External Support/Booster Organization	
Name of Fundraiser	Texas Roadhouse/Percentage of Sales
Sponsor	Janet Smith and Melisa Morgan
Date Submitted	23-Jan-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 To raise funds for 2017 Project Graduation including but not limited to items/prizes for seniors participating in Project Graduation and food

Items to be sold:
 Texas Roadhouse will pick certain nights of the week to donate a portion of the sales to Project Graduation

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
 2017 graduation seniors who attend Project Graduation

Date(s) scheduled:
 At Texas Roadhouse discretion

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Janet Smith
 Melisa Morgan
 Julie Knight

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 1/23/17
 Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

Kw

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Project Graduation
External Support/Booster Organization	
Name of Fundraiser	Buffalo Wild Wings/Percentage of Sales
Sponsor	Janet Smith and Melisa Morgan
Date Submitted	23-Jan-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
To raise funds for 2017 Project Graduation including but not limited to items/prizes for seniors participating in Project Graduation and food

Items to be sold:
Buffalo Wild Wings will pick certain nights of the week to donate a portion of the sales to Project Graduation

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
2017 graduation seniors who attend Project Graduation

Date(s) scheduled:
At Buffalo Wild Wings discretion

Names of adult supervisors at activity (chaperones, custodians, etc.):
Janet Smith
Melisa Morgan
Julie Knight

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
1/23/17
Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

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School	TCCHS
Activity Account	Project Graduation
External Support/Booster Organization	
Name of Fundraiser	Pappa Johns/Percentage of Sales
Sponsor	Janet Smith and Melisa Morgan
Date Submitted	23-Jan-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 To raise funds for 2017 Project Graduation including but not limited to items/prizes for seniors participating in Project Graduation and food

Items to be sold:
 Papa Johns will pick certain nights of the week to donate a portion of the sales to Project Graduation

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
 2017 graduation seniors who attend Project Graduation

Date(s) scheduled:
 At Papa Johns discretion

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Janet Smith
 Melisa Morgan
 Julie Knight

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**

[Signature]
 Principal

Date
 1/23/17

SBDM Council (If Council Policy)

Date

Superintendent

Date

4/20

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Project Graduation
External Support/Booster Organization	
Name of Fundraiser	Dairy Queen/Percentage of Sales
Sponsor	Janet Smith and Melisa Morgan
Date Submitted	23-Jan-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
To raise funds for 2017 Project Graduation including but not limited to items/prizes for seniors participating in Project Graduation and food

Items to be sold:
DQ will pick certain nights of the week to donate a portion of the sales to Project Graduation

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
2017 graduation seniors who attend Project Graduation

Date(s) scheduled:
At DQ discretion

Names of adult supervisors at activity (chaperones, custodians, etc.):
Janet Smith
Melisa Morgan
Julie Knight

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 1/23/17
Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

Law

School	TCCHS
Activity Account	Project Graduation
External Support/Booster Organization	
Name of Fundraiser	Car Show
Sponsor	Janet Smith and Melisa Morgan
Date Submitted	23-Jan-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 To raise funds for 2017 Project Graduation including but not limited to items/prizes for seniors participating in Project Graduation and food

Items to be sold:
 Consessions/Entry Fee - Will combine with already approved Craft Fair

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
 2017 graduation seniors who attend Project Graduation

Date(s) scheduled:
 Tentatively scheduled for April 8th

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Janet Smith
 Melisa Morgan
 Julie Knight

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 1/23/17
 Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

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**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Project Graduation
External Support/Booster Organization	
Name of Fundraiser	Pancake Breakfast
Sponsor	Janet Smith & Melisa Morgan
Date Submitted	9-Jan-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
To acquire funds for 2017 Project Graduation to purchase items for auction the night of the event including laptops, TV's, microwaves, refrigerators, etc.

Items to be sold:
Pancakes, meat and side items

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
2017 graduating seniors who attend Project Graduation

Date(s) scheduled:
March/April 2017

Names of adult supervisors at activity (chaperones, custodians, etc.):
Janet Smith
Melisa 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**


Principal

Date 1/23/17
Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Project Graduation
External Support/Booster Organization	
Name of Fundraiser	Spaghetti Supper
Sponsor	Janet Smith & Melisa Morgan
Date Submitted	9-Jan-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 To acquire funds for 2017 Project Graduation to purchase items for auction the night of the event including laptops, TV's, microwaves, refrigerators, etc.

Items to be sold:
 Spaghetti meal

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
 2017 graduating seniors who attend Project Graduation

Date(s) scheduled:
 March/April 2017

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Janet Smith
 Melisa 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 1/23/17


 Principal

SBDM Council (If Council Policy)

Date

Superintendent

Date

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**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Project Graduation
External Support/Booster Organization	
Name of Fundraiser	5K - St. Patty Run
Sponsor	Janet Smith & Melisa Morgan
Date Submitted	9-Jan-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
To acquire funds for 2017 Project Graduation to purchase items for auction the night of the event including laptops, TV's, microwaves, refrigerators, etc.

Items to be sold:
5K/Run/Walk - Hot chocolate, nachos, etc

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
2017 graduating seniors who attend Project Graduation

Date(s) scheduled:
18-Mar-17

Names of adult supervisors at activity (chaperones, custodians, etc.):
Janet Smith
Melisa Morgan
Julie Knight

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
1/23/17

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	Todd County Central High School
Activity Account	Project Graduation
External Support/Booster Organization	
Name of Fundraiser	Grudge Match
Sponsor	2017 Parents (Janet Smith, Melissa Morgan)
Date Submitted	6-Jan-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
To raise funds for 2017 Project Graduation - funds raised will go toward student prizes.

Items to be sold:

Player entry fee, event shirts (players, teams, spectators), concessions, gate/ticket collection, silent auction items, supper held before event, team photos, grudge match memorabilia, donations collection, pass the hat, free-throw/dunking/3 point contest


Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
2017 Project Graduation

Date(s) scheduled:
4-Mar-17

Names of adult supervisors at activity (chaperones, custodians, etc.):
Janet Smith, Melissa Morgan, Kelli Penick

Athletic Fundraiser If yes, sport involved: _____	Yes <input type="checkbox"/>	No <input 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**


Principal

Date
1/23/17
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	Cookie Dough
Sponsor	Offutt-price
Date Submitted	2-Jan-17

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 for their end of year banquet
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-Aug/Sept
Delivery-Oct

Names of adult supervisors at activity (chaperones, custodians, etc.):
Soccer Parents and Booster Members
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	1-2-17
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-Jan-17

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 replacing missing jerseys and socks for the team.
Banquet at the end of the season

Items to be sold:
Mums

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

Date(s) scheduled:
August 2017 -sales
Sept 2017- delivered

Names of adult supervisors at activity (chaperones, custodians, etc.):
Soccer Parents and Booster Members
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	1-2-17
Coaches Signature (corresponding sport)	

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


Principal

SBDM Council (If Council Policy)

Superintendent

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

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School	TCCHS
Activity Account	Girls Soccer
External Support/Booster Organization	
Name of Fundraiser	Fancloth
Sponsor	Offutt-price
Date Submitted	2-Jan-17

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 replace missing jerseys and socks for the team.
 Also to contribute to the scholarship given at the end of the season.

Items to be sold:
 Cutomized gear-shirts, sweatshirst, socks, pants

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

Date(s) scheduled:
 July/Aug/Sept 2017 -sales
 Sept 2017- delivered

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Soccer Parents and Booster Members
 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	1-2-17
Coaches Signature (corresponding sport)	

Circle One: Approved Not Approved _____
Date

[Signature]
 Principal

SBDM Council (If Council Policy)

Superintendent

JW

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Girls Soccer
External Support/Booster Organization	
Name of Fundraiser	Support Signs for the Field
Sponsor	Offutt-price
Date Submitted	2-Jan-17

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 replace missing jerseys and socks for the team.
 Also to contribute to the scholarship given at the end of the season.

Items to be sold:
 Signs to show support for the girls soccer team.
 The signs will display local businesses names.

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

Date(s) scheduled:
 July/Aug/Sept 2017 -sales

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Soccer Parents and Booster Members
 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	1-2-17
Coaches Signature (corresponding sport)	

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

 _____
Principal

SBDM Council (If Council Policy)

Superintendent

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

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School	TCCHS
Activity Account	Girls Soccer
External Support/Booster Organization	
Name of Fundraiser	Letters of support and spirit
Sponsor	Offutt-price
Date Submitted	2-Jan-17

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 replace missing 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:
 July-Oct 2017 -sales

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Soccer Parents and Booster Members
 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	1-2-17
Coaches Signature (corresponding sport)	

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

 _____
 Principal

SBDM Council (If Council Policy)

Superintendent

JW

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Girls Soccer
External Support/Booster Organization	
Name of Fundraiser	3rd of July Celebration Booth
Sponsor	Offutt-price
Date Submitted	2-Jan-17

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 buy team shirts. This will help with team bondi

Items to be sold:
 Food (Ice cream, Twisted Chips, Hot dogs/chili, Deep fried Desserts) and Tshirts

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

Date(s) scheduled:
 July 3rd, 2017

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

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	1-2-17
Coaches Signature (corresponding sport)	

Circle One: Approved Not Approved _____

 Principal

SBDM Council (If Council Policy) _____

Superintendent _____