

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCMS
Activity Account	Fuzzy Friends
External Support/Booster Organization	n/a
Name of Fundraiser	Food Drive/ Pizza Party for 6th period <i>Treat from Cater</i>
Sponsor	Julie Hamlet/ Kadi Ralston
Date Submitted	24-Mar-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 All of the dog food and cat food raised, will be donated to animal shelters near Todd County.

Items to be sold:
 n/a

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

Date(s) scheduled:
 April 10-April 28

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Julie Hamlet, Kadi Ralston

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>K. Ralston</i>		
Coaches Signature (corresponding sport)	Date	

Circle One: Approved Not Approved

Principal *JH* _____ Date 3/30/17

SBDM Council (If Council Policy) _____ Date _____

Superintendent _____ Date _____

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCMS
Activity Account	Athletics
External Support/Booster Organization	n/a
Name of Fundraiser	Special Olympics T-Shirts
Sponsor	Heather Key
Date Submitted	24-Mar-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
To provide t-shirts and food for special olympics participants.

Items to be sold:
T-Shirts

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

Date(s) scheduled:
April 11-April 20

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

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"/>
Coaches Signature (corresponding sport) <i>Heather Key</i>	Date	

Circle One: Approved Not Approved

Principal *J. Key* Date 3/30/17

SBDM Council (If Council Policy) Date

Superintendent Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCMS
Activity Account	School Play/Drama Dinner Theater
External Support/Booster Organization	N/A
Name of Fundraiser	Chateau La Roach Dinner Theater
Sponsor	Shannon Jolicoeur
Date Submitted	3/27/2017

Purpose of fundraising activity: Funds from this fundraiser will be used for the purchase of supplies for the play and food for the dinner. L and R will be providing the food.

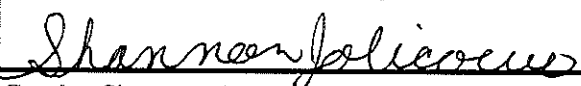
Some items that may be purchased- Paper, props, costumes, paper stage material, scripts, wood, material, etc.

Type of fundraising Pre-order and buy at the door ticket sales.

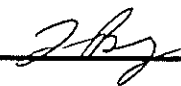
Beneficiary of fundraising activity: TCMS Drama/Play Production will be the beneficiary of this fundraiser.

Date(s) scheduled: Pre-order Ticket Sales will begin April 10, 2017
Play Performance Dates- May 4-7 2017

Names of adult supervisors at activity (chaperones, custodians, etc.): Shannon Jolicoeur
Melanie Vincent

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"/>
		
Coaches Signature (corresponding sport)	Date	

Circle One: Approved Not Approved

Principal  Date 3/30/17

SBDM Council (If Council Policy) Date

Superintendent Date