

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

YH

School	TCCHS
Activity Account	
External Support/Booster Organization	Football
Name of Fundraiser	Football Concessions
Sponsor	Les Broady
Date Submitted	15-Jun-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 To raise funds for the expenses of the 2017-2018 Football Season, including but not limited to uniforms, travel, equipment, food, etc.

Items to be sold:
 Concessions food: cokes, powerade, water, sandwiches, candy, chips, etc.

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

Date(s) scheduled:
 August - October 2017 (Entire football season at all home games)

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Les Broady
 Football Booster parents

Athletic Fundraiser	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If yes, sport involved: Football	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Corresponding sport participating in fundraiser?		
<i>[Signature]</i>	6-15-17	
Coaches Signature (corresponding sport)	Date	

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

[Signature]
 Principal

Date
 6/22/17
 Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

VW

School	TCCHS
Activity Account	
External Support/Booster Organization	Football
Name of Fundraiser	TCMS Football Concessions
Sponsor	Les Broady
Date Submitted	15-Jun-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
 To raise funds for the expenses of the 2017-2018 Football Season, including but not limited to uniforms, travel, equipment, food, etc.

Items to be sold:

Concessions food: cokes, powerade, water, sandwiches, candy, chips, etc

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

All TCCHS football players and proceeds to be split with TCMS Dance Team

Date(s) scheduled:

August - October 2017 (Entire football season at all home TCMS Football games)

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

Les Broady

Football Booster parents

Athletic Fundraiser	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If yes, sport involved: Football		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>[Signature]</i>	<i>6-15-17</i>	
Coaches Signature (corresponding sport)	Date	

Circle One:

Approved

Not Approved

Jenni R.
Principal

Date

6/22/17

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

VW

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	
External Support/Booster Organization	Football
Name of Fundraiser	Donation letters
Sponsor	Les Broady
Date Submitted	15-Jun-17

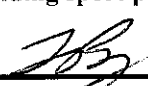
Purpose of fundraising activity: (What will the funds be used for? Be specific)
 To raise funds for the expenses of the 2017-2018 Football Season, including but not limited to uniforms, travel, equipment, food, etc.

Items to be sold:
 N/A mailing letters to businesses and individuals for donations

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

Date(s) scheduled:
 July 15 - end of football season

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Les Broady
 Football Booster parents

Athletic Fundraiser	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If yes, sport involvec Football		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	6-15-17	
Coaches Signature (corresponding sport)	Date	

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


 Principal

Date
 6/22/17
 Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

✓
Lew

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	
External Support/Booster Organization	Football
Name of Fundraiser	Peaches Sale
Sponsor	Les Broady
Date Submitted	15-Jun-17

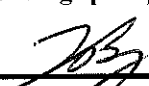
Purpose of fundraising activity: (What will the funds be used for? Be specific)
 To raise funds for the expenses of the 2017-2018 Football Season, including but not limited to uniforms, travel, equipment, food, etc.

Items to be sold:
 Peaches

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

Date(s) scheduled:
 July 15 - July 31

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Les Broady
 Football Booster parents

Athletic Fundraiser	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
If yes, sport involved	Football			
Corresponding sport participating in fundraiser?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Coaches Signature (corresponding sport)			Date
				6-15-17

Circle One: Approved Not Approved


 Principal

Date
 6/20/17
 Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

Vow

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	
External Support/Booster Organization	Football
Name of Fundraiser	Signs
Sponsor	Les Broady
Date Submitted	15-Jun-17

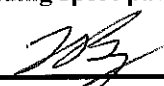
Purpose of fundraising activity: (What will the funds be used for? Be specific)
 To raise funds for the expenses of the 2017-2018 Football Season, including but not limited to uniforms, travel, equipment, food, etc.

Items to be sold:
 Signs to be displayed around the field

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

Date(s) scheduled:
 July 15 - end of football season

Names of adult supervisors at activity (chaperones, custodians, etc.):
 Les Broady
 Football Booster parents

Athletic Fundraiser	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If yes, sport involved:		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	6-15-17	
Coaches Signature (corresponding sport)	Date	

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


 Principal

Date
 6/22/17
 Date

SBDM Council (If Council Policy)

Date

Superintendent

Date