

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

Pw

School	Todd County Central High School
Activity Account	Cheer
External Support/Booster Organization	
Name of Fundraiser	Mini Rebels Tumble/cheer class
Sponsor	Contessa Orr & Amber Gant
Date Submitted	7/21/2017

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

Coaches and cheerleaders will lead a weekly tumbling class for elementary age students at the cost of \$5 per class.

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

TCCHS Cheer Squad

Date(s) scheduled:

8/23/17-5/23/18

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

Contessa Orr, Amber Gant

Athletic Fundraiser

Yes ☒ No ☐

If yes, sport involved:

Corresponding sport participating in fundraiser?

Yes ☒ No ☐

Contessa Orr, Amber Gant

7/21/2017

Coaches Signature (corresponding sport)

Date

Circle One:

Approved

Not Approved

Date

Jamie P
Principal

7/24/17

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

Pw

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

A

School	TCCHS
Activity Account	Dance Team
External Support/Booster Organization	
Name of Fundraiser	Butterbraids
Sponsor	Katherine Power Cole
Date Submitted	

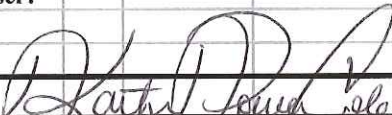
Purpose of fundraising activity: (What will the funds be used for? Be specific)
Uniforms, Dance wear, Shoes, Competition Fees, Competition Hotel Rooms, and/or Poms

Items to be sold:
Butterbraids, a frozen breakfast pastry.

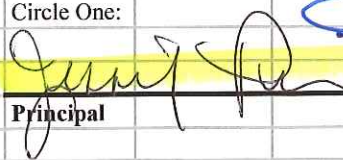
Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
All Dancers

Date(s) scheduled:
September-October

Names of adult supervisors at activity (chaperones, custodians, etc.):
Katherine Power Cole
LeAnn Russell
Becky Barrow

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

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

Ru

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

A

School	TCCHS
Activity Account	Dance Team
External Support/Booster Organization	
Name of Fundraiser	Car Decals
Sponsor	Katherine Power Cole
Date Submitted	


Purpose of fundraising activity: (What will the funds be used for? Be specific)
Uniforms, Dance wear, Shoes, Competition Fees, Competition Hotel Rooms, and/or Poms

Items to be sold:
TC car decals with sports name and/or student name/ jersey number.

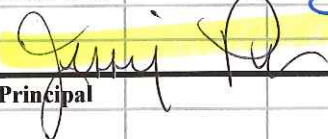
Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
All Dancers

Date(s) scheduled:
September-October

Names of adult supervisors at activity (chaperones, custodians, etc.):
Katherine Power Cole
LeAnn Russell
Becky Barrow

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"/>
Coaches Signature (corresponding sport)				Date

Circle One: Approved Not Approved

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

Pw

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

School	TCCHS
Activity Account	Dance Team
External Support/Booster Organization	
Name of Fundraiser	Mini Dance Camp
Sponsor	Katherine Power Cole
Date Submitted	

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Uniforms, Dance wear, Shoes, Competition Fees, Competition Hotel Rooms, and/or Poms

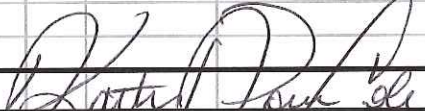
Items to be sold:
Dance team members will hold a camp for elementary age dancers to come and learn a dance routine to be performed at the last TCCHS football game.

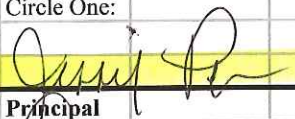
Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
All Dancers

Date(s) scheduled:
September-October

Names of adult supervisors at activity (chaperones, custodians, etc.):
Katherine Power Cole
LeAnn Russell
Becky Barrow

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

Coaches Signature (corresponding sport)  Date

Circle One:  Approved Not Approved Date

SBDM Council (If Council Policy) Date

Superintendent Date

Pw

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

A

School	TCCHS
Activity Account	Dance Team
External Support/Booster Organization	
Name of Fundraiser	Rada Knives
Sponsor	Katherine Power Cole
Date Submitted	

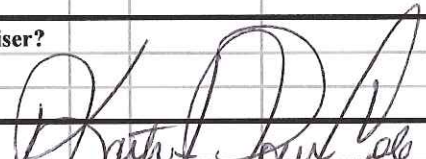
Purpose of fundraising activity: (What will the funds be used for? Be specific)
Uniforms, Dance wear, Shoes, Competition Fees, Competition Hotel Rooms, and/or Poms

Items to be sold:
Rada Knives sold outside of school to adults only and delivered directly to them off campus.

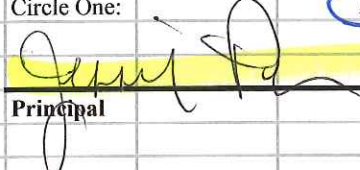
Beneficiary of fundraising activity: (Who will receive the benefit of the funds)
All Dancers

Date(s) scheduled:
October-November

Names of adult supervisors at activity (chaperones, custodians, etc.):
Katherine Power Cole
LeAnn Russell
Becky Barrow

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"/>
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

Handwritten signature

School	TCCHS
Activity Account	FFA
External Support/Booster Organization	
Name of Fundraiser	Apparel
Sponsor	Gilliam/White
Date Submitted	1-Aug-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Students will sale shirts to raise profit for ag classes.

Items to be sold:
shirts

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

Date(s) scheduled:
August 2017-May 2018

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

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>Be White</i>	<i>8/7/17</i>
Coaches Signature (corresponding sport)	Date

Circle One:

Approved

Not Approved

Handwritten signature
Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

FW

School	TCCHS
Activity Account	FFA
External Support/Booster Organization	
Name of Fundraiser	Banquet Sponsors
Sponsor	Gilliam/White
Date Submitted	1-Aug-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Students will collect sponsorships for FFA banquet.

Items to be sold:
Banquet Sponsors - letters are sent out to businesses and supporters to make a donation to support our annual awards banquet.

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

Date(s) scheduled:
March 2018-May 2018

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

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>[Signature]</i>	8/7/17	
Coaches Signature (corresponding sport)	Date	

Circle One: Approved Not Approved

<i>[Signature]</i>	Date
Principal	Date
SBDM Council (If Council Policy)	Date
Superintendent	Date

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

EW

School	TCCHS
Activity Account	FFA
External Support/Booster Organization	
Name of Fundraiser	Dairy Queen Cards
Sponsor	Gilliam/White
Date Submitted	1-Aug-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Students will sale dairy queen bogo cards, to raise a profit to support ag classes.

Items to be sold:
Dairy Queen BOGO cards

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

Date(s) scheduled:
August - Dec 2017

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

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>[Signature]</i>	
	Date <i>8/1/17</i>	

Circle One: Approved Not Approved

<i>[Signature]</i>	Date
Principal	Date
SBDM Council (If Council Policy)	Date
Superintendent	Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

fw

School	TCCHS
Activity Account	FFA
External Support/Booster Organization	
Name of Fundraiser	Greenhouse
Sponsor	Gilliam/White
Date Submitted	1-Aug-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Students will sale greenhouse plants for profit for ag classes.

Items to be sold:
plants

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

Date(s) scheduled:
March 2018-May 2018

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

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>Julia Gilliam</i>	<i>8/7/17</i>	
Coaches Signature (corresponding sport)	Date	

Circle One: Approved Not Approved

[Signature]
Principal

_____ Date

_____ Date

SBDM Council (If Council Policy)

_____ Date

Superintendent

_____ Date

SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL

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School	TCCHS
Activity Account	FFA
External Support/Booster Organization	
Name of Fundraiser	Pee Jay's Fresh Fruit
Sponsor	Gilliam/White
Date Submitted	1-Aug-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Students will sale fruit to raise a profit for ag classes.

Items to be sold:
Fruit

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

Date(s) scheduled:
October - November 2017

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

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>Brooke White</i>		8/7/17
Coaches Signature (corresponding sport)		Date

Circle One: Approved Not Approved

[Signature]
Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

BW

School	TCCHS
Activity Account	FFA
External Support/Booster Organization	
Name of Fundraiser	Shop Projects
Sponsor	Gilliam/White
Date Submitted	1-Aug-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)
Students will sale shop projects for profit for ag classes.

Items to be sold:
shop projects (e.g., cornhole boards, pallet art, bird houses, and other projects created by the Ag Department)

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

Date(s) scheduled:
August 2017-May 2018

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

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>[Signature]</i> Date <u>8/7/17</u>

Circle One: Approved Not Approved

Principal <i>[Signature]</i>	Date _____
SBDM Council (If Council Policy)	Date _____
Superintendent	Date _____