

RW

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Band
External Support/Booster Organization	
Name of Fundraiser	Dairy Queen
Sponsor	Williams
Date Submitted	28-Aug-17

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

All funds will be used to benefit all aspects of the band program

Items to be sold:

Nothing sold, DQ will give percentage of sales for the night

Beneficiary of fundraising activity:

(Who will receive the benefit of the funds)

TCCHS Band

Date(s) scheduled:

September 19, October 12, November 9, December 7

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

Williams

Athletic Fundraiser

Yes

☐

No

☐

If yes, sport involved:

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

Date

*Tw*

SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL

School	TCHS
Activity Account	Band
External Support/Booster Organization	
Name of Fundraiser	Harvest Fest
Sponsor	Williams
Date Submitted	28-Aug-17

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

All funds will be used to benefit all aspects of the band program

Items to be sold:

Concessions - Food, drink, Candy

Beneficiary of fundraising activity:

(Who will receive the benefit of the funds)

TCHS Band

Date(s) scheduled:

7-Oct-17

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

Williams

Athletic Fundraiser

Yes

☐

If yes, sport involved:

Corresponding sport participating in fundraiser?

Yes

☐

Coaches Signature (corresponding sport)

Circle One:

Approved

Not Approved

Date

Principal

SBDM Council (If Council Policy)

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	TCCHS Boys Basketball
External Support/Booster Organization	
Name of Fundraiser	Banners
Sponsor	Frank Johnson
Date Submitted	8/11/17

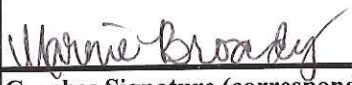
Purpose of fundraising activity: (What will the funds be used for? Be specific)  
Funds raised will be used for travel, uniforms, clothing, and necessary equipment for Boys Basketball

Items to be sold:  
Businesses will buy advertisement space in the gym

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

Date(s) scheduled:  
Fall 2017 / Winter 2018

Names of adult supervisors at activity (chaperones, custodians, etc.):  
Frank Johnson - Head Coach

Athletic Fundraiser	Yes	<input checked="" type="checkbox"/>
If yes, sport involved:		
Corresponding sport participating in fundraiser?	Yes	<input type="checkbox"/>
		
Coaches Signature (corresponding sport)		

Circle One:                      Approved                      Not Approved

  
Principal

Date

SBDM Council (If Council Policy)

Superintendent

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	TCCHS Boys Basketball
External Support/Booster Organization	
Name of Fundraiser	Car Washes
Sponsor	Frank Johnson
Date Submitted	8/11/17

Purpose of fundraising activity: (What will the funds be used for? Be specific)  
 Funds raised will be used for travel, uniforms, clothing, and necessary equipment for Boys Basketball

Items to be sold:  
 Wash Cars

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

Date(s) scheduled:  
 Fall 2017 - Spring 2018

Names of adult supervisors at activity (chaperones, custodians, etc.):  
 Frank Johnson - Head Coach

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"/>
<i>Marnie Broady</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**

School	TCCHS
Activity Account	TCCHS Boys Basketball
External Support/Booster Organization	
Name of Fundraiser	Basketball Camp
Sponsor	Frank Johnson
Date Submitted	8/11/17

Purpose of fundraising activity: (What will the funds be used for? Be specific)  
Funds raised will be used for travel, uniforms, clothing, and necessary equipment for Boys Basketball

Items to be sold:  
Basketball Camp to instruct youth on fundamentals of basketball

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

Date(s) scheduled:  
Spring/Summer 2018

Names of adult supervisors at activity (chaperones, custodians, etc.):  
Frank Johnson - Head Coach

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"/>
<i>Winnie Broady</i>		
Coaches Signature (corresponding sport)		Date

Circle One:                      Approved                      Not Approved

*Jan R*  
Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	TCCHS Boys Basketball
External Support/Booster Organization	
Name of Fundraiser	Chili Suppers - 2
Sponsor	Frank Johnson
Date Submitted	8/11/17

Purpose of fundraising activity: (What will the funds be used for? Be specific)  
 Funds raised will be used for travel, uniforms, clothing, and necessary equipment for Boys Basketball

Items to be sold:  
 Sell tickets for a chili meal

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

Date(s) scheduled:  
 Fall 2017 & Winter 2017-18

Names of adult supervisors at activity (chaperones, custodians, etc.):  
 Frank Johnson - Head Coach

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"/>
<i>Marlene Broady</i>		
Coaches Signature (corresponding sport)		Date

Circle One:                      Approved                      Not Approved

*James P.*  
 Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

*Tw*

School	TCCHS
Activity Account	TCCHS Boys Basketball
External Support/Booster Organization	
Name of Fundraiser	Donation Letters
Sponsor	Frank Johnson
Date Submitted	8/11/17

Purpose of fundraising activity: (What will the funds be used for? Be specific)  
Funds raised will be used for travel, uniforms, clothing, and necessary equipment for Boys Basketball

Items to be sold:  
Mail letters to businesses for monetary donations

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

Date(s) scheduled:  
Fall 2017

Names of adult supervisors at activity (chaperones, custodians, etc.):  
Frank Johnson - Head Coach

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"/>
<i>Marine Broady</i>		
Coaches Signature (corresponding sport)	Date	

Circle One:

Approved

Not Approved

Date

*Jan R*  
Principal

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date



**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	Todd County Central High School
Activity Account	TCCHS Boys JV & V Soccer
External Support/Booster Organization	
Name of Fundraiser	Fan Cloth - Apparel Fundraiser
Sponsor	Elizabeth Bailey
Date Submitted	8/8/2017

Purpose of fundraising activity: (What will the funds be used for? Be specific)  
Funds raised will be used for travel, jerseys and necessary equipment, and team-bonding opportunities for  
Boys JV and V Soccer

Items to be sold:  
Personalized apparel ( shirts, outerwear, pants/shorts) relating to TC Soccer

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)  
TCCHS Boys JV & V Soccer Teams

Date(s) scheduled:  
Sept 12 though Sept 25, 2017

Names of adult supervisors at activity (chaperones, custodians, etc.):  
Elizabeth Bailey - Head Coach      Alex Herrera - Asst. Coach  
Cindy Law & Other Parent Volunteers

Athletic Fundraiser	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If yes, sport involved Boys JV & V Soccer		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Coaches Signature (corresponding sport) <i>Elizabeth Bailey</i>	8/10/17 Date	

Circle One:                      Approved                      Not Approved

Principal *[Signature]*

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date



**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	Todd County Central High School
Activity Account	TCCHS Boys JV & V Soccer
External Support/Booster Organization	
Name of Fundraiser	Soda Shop Night
Sponsor	Elizabeth Bailey
Date Submitted	8/8/2017

Purpose of fundraising activity: (What will the funds be used for? Be specific)  
 Funds raised will be used for travel, jerseys and necessary equipment, and team-bonding opportunities for Boys JV and V Soccer

Items to be sold:  
 Boys JV & V will work at the Soda Shop in Elkton one evening and a percentage of proceeds will be donated to the team

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)  
 TCCHS Boys JV & V Soccer Teams

Date(s) scheduled:  
 Fall 2017

Names of adult supervisors at activity (chaperones, custodians, etc.):  
 Elizabeth Bailey - Head Coach Alex Herrera - Asst. Coach  
 Cindy Law & Other Parent Volunteers

Athletic Fundraiser	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If yes, sport involved Boys JV & V Soccer		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Coaches Signature (corresponding sport) <i>Elizabeth Bailey</i>	8/10/17	
	Date	

Circle One:                      Approved                      Not Approved

*[Signature]*  
 Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	Todd County Central High School
Activity Account	TCCHS Boys JV & V Soccer
External Support/Booster Organization	
Name of Fundraiser	Donation Letters
Sponsor	Elizabeth Bailey
Date Submitted	8/8/2017

Purpose of fundraising activity: (What will the funds be used for? Be specific)  
Funds raised will be used for travel, jerseys and necessary equipment, and team-bonding opportunities for Boys JV and V Soccer

Items to be sold:  
Letters soliciting donations from local businesses and entrepreneurs

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)  
TCCHS Boys JV & V Soccer Teams

Date(s) scheduled:  
Fall 2017

Names of adult supervisors at activity (chaperones, custodians, etc.):  
Elizabeth Bailey - Head Coach    Alex Herrera - Asst. Coach  
Cindy Law & Other Parent Volunteers

Athletic Fundraiser	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If yes, sport involved Boys JV & V Soccer		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Coaches Signature (corresponding sport) <i>Elizabeth Bailey</i>	8/10/17 Date	

Circle One:                      Approved                      Not Approved

*[Signature]*  
Principal

Date

Date

SBDM Council (If Council Policy)

Date

Superintendent

Date

RW

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

<b>School</b>	Todd County Central High School
<b>Activity Account</b>	TCCHS Boys JV & V Soccer
<b>External Support/Booster Organization</b>	
<b>Name of Fundraiser</b>	Mums Sales
<b>Sponsor</b>	Elizabeth Bailey
<b>Date Submitted</b>	8/8/2017

**Purpose of fundraising activity:** (What will the funds be used for? Be specific)  
 Funds raised will be used for travel, jerseys and necessary equipment, and team-bonding opportunities for Boys JV and V Soccer

**Items to be sold:**  
 Potted Mums

**Beneficiary of fundraising activity:** (Who will receive the benefit of the funds)  
 TCCHS Boys JV & V Soccer Teams

**Date(s) scheduled:**  
 Fall 2017

**Names of adult supervisors at activity (chaperones, custodians, etc.):**  
 Elizabeth Bailey - Head Coach    Alex Herrera - Asst. Coach  
 Cindy Law & Other Parent Volunteers

<b>Athletic Fundraiser</b> If yes, sport involved Boys JV & V Soccer	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<b>Corresponding sport participating in fundraiser?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Coaches Signature (corresponding sport)</b> <i>Elizabeth Bailey</i>	Date <u>8/10/17</u>

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

*[Signature]*  
 Principal

\_\_\_\_\_ Date

\_\_\_\_\_ Date

\_\_\_\_\_ SBDM Council (If Council Policy)

\_\_\_\_\_ Date

\_\_\_\_\_ Superintendent

\_\_\_\_\_ Date



SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL

*BW*

School	Todd County Central High School
Activity Account	Cheer
External Support/Booster Organization	
Name of Fundraiser	Pink breast cancer awareness shirts
Sponsor	Contessa Orr & Amber Gant
Date Submitted	9/5/17

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

The funds from this activity will be used to purchase cheer supplies

Items to be sold:

Pink "Fight with Us" Breast Cancer Awareness shirts to be sold to wear at October football games

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

TCCHS Cheer Squad

Date(s) scheduled:

9/25-10/20/17

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"/>
<i>Contessa Orr, Amber Gant</i>		9/5/17
Coaches Signature (corresponding sport)		Date

Circle One:                      Approved                      Not Approved

*Gant R*  
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	Pulcera Project
Sponsor	Julie Gilliam
Date Submitted	5-Sep-17

Purpose of fundraising activity: (What will the funds be used for? Be specific)  
 The purpose of the Pulcera Project is to provide a service by raising funds for scholarships for children in thirdworld country regions of South America. The main purpose of this fundraiser is to act as a service project.

Items to be sold:  
 Pulcera Bracelets

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

Date(s) scheduled:  
 9/25-10/13

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

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

*Julie Gilliam*  
 Principal

\_\_\_\_\_ Date

\_\_\_\_\_ Date

SBDM Council (If Council Policy)

\_\_\_\_\_ Date

Superintendent

\_\_\_\_\_ Date

Pope

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	TCCHS
Activity Account	Relief Fund
External Support/Booster Organization	
Name of Fundraiser	Relief for Hurricane Victims
Sponsor	Pope
Date Submitted	9/5/17

Purpose of fundraising activity: (What will the funds be used for? Be specific)  
The school will collect donations (e.g., food, clothing, supplies, gift cards, money, etc.) for flood victims due to hurricanes.

Items to be sold:  
Nothing will be sold; items will be collected.

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)  
hurricane/flood victims

Date(s) scheduled:  
Upon approval through December 15th

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

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