School	TCCHS	
Activity Account	Cheerleading	
External Support/Booster Organization		
Name of Fundraiser	FanCloth Apparel	
Sponsor	Amber Gant	
Date Submitted	7/9/2018	
Purpose of fundraising activity: The funds from this activity will be used to	(What will the funds be used for purchase new uniforms, signs, appare	? Be specific) el and other cheer supplies
Items to be sold: FanCloth - t-shirts and other apparel with t	he TCCHS logo	
Beneficiary of fundraising activity: TCCHS Cheer Squad	(Who will receive the benefit of	the funds)
August 14, 2018 - September 15, 2018  Names of adult supervisors at activity (chapamber Gant	perones, custodians, etc.):	
Athletic Fundraiser		Yes X No
If yes, sport involved cheerleading		
Corresponding sport participating in fundr	aiser?	Yes X No
Coaches Signature (corresponding sport)		Date
Circle One: Approved	Not Approved	
the total control of the control of		Date
Principal		Date
SBDM Council (If Council Policy)		Date
Superintendent		Date

Superintendent

School	Todd County Central High School			
Activity Account	Cheer			
External Support/Booster Organization				
Name of Fundraiser	Look What's Poppin' Popcorn			
Sponsor	Amber Gant			
Date Submitted	7/31/2018			
Purpose of fundraising activity:	(What will the funds be used for? Be specifi			
The funds from this activity will be used to pu	archase new uniforms, signs, apparel and other ch	neer suppl	lies	
Items to be sold: Popcorn				
Beneficiary of fundraising activity:	(Who will receive the benefit of the funds)			
TCCHS Cheer Squad				
Date(s) scheduled: 10-1-18 to 11-1-18  Names of adult supervisors at activity (chape	rones, custodians, etc.):			
Amber Gant				
			300	
		AL THE STATE OF TH		
Athletic Fundraiser		Yes	x	No
If yes, sport involved:				
Corresponding sport participating in fundral	iser?	Yes	x	No
Amber Gant			7/3	31/2018
Coaches Signature (corresponding sport)			Date	
Circle One: Approved	Not Approved			
Ment & D			Date	
Principal			Date	
SBDM Council (If Council Policy)			Date	
Superintendent			Date	

School	Todd County Central High School		
Activity Account	Cheer		
External Support/Booster Organization			
Name of Fundraiser	Mini Cheer Camp		
Sponsor	Amber Gant		
Date Submitted	7/31/2018		
Purpose of fundraising activity:	(What will the funds be used for? E		
The funds from this activity will be used to pu	rchase new uniforms, signs, apparel and	other cheer supplies	
Items to be sold: Cost to attend the camp			
Beneficiary of fundraising activity:	(Who will receive the benefit of the	funds)	
TCCHS Cheer Squad			
Names of adult supervisors at activity (chape	rones, custodians, etc.):		
Athletic Fundraiser		Yes X	No
If yes, sport involved:		— "	_ , _
Corresponding sport participating in fundra	ser?	Yes	No
			7/31/2018
Amber Gant			
Coaches Signature (corresponding sport)			Date
C' 1 0	Not Approved		
Circle One: Approved	Not Approved		Date
10 151			
Death	The transfer of the same of the same	-	Date
Principal			Date
SBDM Council (If Council Policy)			Date
	*		
Superintendent		-	Date

School	Todd County Central High School			
Activity Account	Cheer			
External Support/Booster Organization				
Name of Fundraiser	Schlabach's Bakery			
Sponsor	Amber Gant			
Date Submitted	7/31/2018			
Purpose of fundraising activity:	(What will the funds be used for? Be sp			
The funds from this activity will be used to p	urchase new uniforms, signs, apparel and oth	ier cheer suppli	es	
Items to be sold:				
Schlabach Bakery Items				
Beneficiary of fundraising activity:	(Who will receive the benefit of the fur	ıds)		
TCCHS Cheer Squad				
Date(s) scheduled: 10-15-2018-11-15-2018				
Names of adult supervisors at activity (chape	erones, custodians, etc.):			
Amber Gant				
	· · · · · · · · · · · · · · · · · · ·	V	I. I	No.
Athletic Fundraiser		Yes	Х	No
If yes, sport involved:	signary	- Yes	х	No 🗌
Corresponding sport participating in fundra	iser:	1 03	<u>ا</u>	
Amber Gant			7/3	31/2018
Coaches Signature (corresponding sport)		=	Date	
Coaches Signature (corresponding sport)				
Circle One: Approved	Not Approved			
Districts Sufficients		· ·	Date	
10000				
Principal		_	Date	
		_	- n	
SBDM Council (If Council Policy)			Date	
Superintendent		_	Date	
Supermenuent				

School	Todd County Central High School			
Activity Account	Cheer			
External Support/Booster Organization				
Name of Fundraiser	Breast Cancer Awareness T-Shirts			
Sponsor	Amber Gant			
Date Submitted	7/31/2018			
Purpose of fundraising activity:	(What will the funds be used for? Be specifi	ic)		
The funds from this activity will be used to pu	urchase new uniforms, signs, apparel and other cl	heer supp	lies	
8 8				
Items to be sold: Breast Cancer T-shirts				
Beneficiary of fundraising activity:	(Who will receive the benefit of the funds)			
TCCHS Cheer Squad				
				A STATE OF THE STA
Date(s) scheduled: 11-15-18 to 12-31-18				
Names of adult supervisors at activity (chape	erones, custodians, etc.):			
Amber Gant				
				and the second second
		N/		No. I
Athletic Fundraiser		Yes	X	No
If yes, sport involved:		Yes		No 🔲
Corresponding sport participating in fundra	iser?	1 68	X	110
Amber Gant			7/3	31/2018
			Date	
Coaches Signature (corresponding sport)			Date	
Circle One: Approved	Not Approved			
			Date	
IA IS				
Ment			Date	
Principal	)		Date	
SBDM Council (If Council Policy)			Date	
Superintendent			Date	

School	Todd County Central High School			
Activity Account	Cheer			
External Support/Booster Organization				
Name of Fundraiser	TCCHS t-shirts/apparel through Fan C	loth		
Sponsor	Amber Gant			
Date Submitted	7/31/2018			
Purpose of fundraising activity:	(What will the funds be used for? Be spe			
The funds from this activity will be used to p	urchase new uniforms, signs, apparel and othe	er cheer suppli	es	
Items to be sold: Fan Cloth - t-shirts and other apparel with T	CCHS logo			
Beneficiary of fundraising activity:	(Who will receive the benefit of the fund	ds)		
TCCHS Cheer Squad				
Names of adult supervisors at activity (chape	erones, custodians, etc.):			
Timot Suit				
Athletic Fundraiser		Yes	х	No
If yes, sport involved:		_		
Corresponding sport participating in fundra	iser?	Yes	X	No
Amber Gant			7/3	31/2018
Coaches Signature (corresponding sport)			Date	
Circle One: Approved	Not Approved	ii.		
			Date	
10011		a		
Principal		=	Date	
CDDM Council (If Council Delice)		<del>-</del> 2	Date	
SBDM Council (If Council Policy)				
Superintendent		-	Date	
Superintenuent				

	SCHOOL ACTIVITY F	UND		
	FUNDRAISER APPRO	VAL	T 7	
School	TCCHS			
Activity Account	Dance Team			
External Support/Booster Organization				
Name of Fundraiser	Butterbraids			
Sponsor	Katherine Powe	r Cole		***************************************
Date Submitted				
		1		
Purpose of fundraising activity:	(What will the funds b	e used for? Be specific)		
Uniforms, Dance wear, Shoes, Competitio	on Fees, Competition Hotel Rooms	s, and/or Poms		
		-		
		***************************************		
Items to be sold:				
Frozen butterbraids, frozen pastries		A STORY OF THE STO		
		***************************************		
Beneficiary of fundraising activity:	(Who will receive the	benefit of the funds)		
All Dancers		97.4		
	***************************************	***************************************		
				-
Date(s) scheduled:			<u> </u>	
September-November		***************************************		
		90		
***************************************				
Names of adult supervisors at activity (ch	aperones, custodians, etc.):			
Katherine Power Cole		***************************************		
- decomposition of the second	-			
			$\perp$	
	- Anna Carlo	****		
	STATE OF THE PARTY	and the second s		
Athletic Fundraiser		Yes	X	No
If yes, sport involved:				
Corresponding sport participating in fun	draiser?	Yes	X	No
				1
Marine Broada				
Coaches Signature (corresponding sport)				Date
Circle One: Approv	ved Not Approved			And the state of t
The state of the s			Da	te
Don't				
Principal				Date
1 AMOUNTAL				Parameter Parame

4	SCHO	OL ACTIVI	TY FUND			***************************************	
	FUND	RAISER AF	PROVAL			-	
							$\dashv$
School		TCCHS					
Activity Account		Dance Tea	m				_
External Support/Booster Organization	on		- Control of the Cont				+
Name of Fundraiser		Dance Car	- Day - I				-
Sponsor		Katherine	Power Cole				_
Date Submitted							-+
			1 1	Do specific)			
Purpose of fundraising activity:			funds be used for?				-
Uniforms, Dance wear, Shoes, Compe	etition Fees, Co	mpetition H	otei Rooms, and/o	I TOMS			$\neg$
Items to be sold: TCCHS Dancers will be leading a car	nn fou clomont	ory and mid	dle school age dan	cer Dancers wi	II le:	arn a dance	to per
at a TCCHS home game and basketb	all some Deter	ary and mid	acided based on w	hich one works	hes	t with the at	hletic
at a TCCHS home game and basketo	all game. Date:	their camp	fee	men one work	, Del		
Also, participants would receive a t-sl	nirt included ii	ho will recei	ve the benefit of th	e funds)		***	
Beneficiary of fundraising activity:	(**	IIO WIII TECEI	Ve the benefit of the	Tunus)	-		
All Dancers							
							T
	,				1		
Date(s) scheduled:			+		-		
2018-2019 Football Game							
2019 Basketball Game	-						
Names of adult supervisors at activity	v (ahanayanas	oustodians (	etc).		$\vdash$		
	y (chaperones,	custouians,	1		1		
Katherine Power Cole	***						
				Yes	X	No	ΠŤ
Athletic Fundraiser				103	/ X	110	
If yes, sport involved:	6 1 : 0			Yes	X	No	
Corresponding sport participating in	fundraiser?			163	Λ	110	
TA WELL DE BOOKER							
Marrie Broady						Data	
Coaches Signature (corresponding sp	oort)				+	Date	
		NI-4 A	l		+	<u>                                     </u>	
Circle One: Appro	oved	Not Approv	vea		Da	te	
Idential -					Da		+
	)				-	Date	
Principal		-			1	1	
					-		
CDDM Consult (If Consult Bollow)						Date	
SBDM Council (If Council Policy)	Land State of the						

		OL ACTIVI RAISER AF					42000
	FUND	RAISER AF	PROVAL				
		TCCHS					
School		Dance Tea	m				
Activity Account		Dance Tea			$\Box$		
External Support/Booster Organization		Rada Kniv	705				
Name of Fundraiser			Power Cole				
Sponsor		Natherme	Tower Cole				
Date Submitted				-			
D CC Indiana activity:	(WI	of will the f	unds be used for?	Be specific)			
Purpose of fundraising activity: Uniforms, Dance wear, Shoes, Competiti							
Uniforms, Dance wear, Shoes, Competer	on rees, ee			-			
				-			
Items to be sold:							
Rada Knives and kitchen utensils.	Kni	ves will be d	lelivered after scho	ool hours and r	ot o	n the campu	ıs.
Naud Killves and Ricemen decision							
Beneficiary of fundraising activity:	(WI	10 will recei	ve the benefit of th	e funds)			
All Dancers							
	-						
Date(s) scheduled:							
October							
	1				_		
			1		_		
Names of adult supervisors at activity (c	haperones,	custodians,	etc.):		ļ		
Katherine Power Cole							
				-			-
					-		
					77	N.	_
Athletic Fundraiser				Yes	X	No	H
If yes, sport involved:			-	<b>W</b> 7	v	N.T.	
Corresponding sport participating in fu	ndraiser?			Yes	X	No	
I be to the same					+		
Marini Bready						Dot	
Coaches Signature (corresponding spor	t)					Date	$\vdash$
		N. J.			+-		$\vdash$
Circle One: Approve	d	Not Appro	vea		Da	ite	
10 11 2					100		
A MALL						Date	
Principal							
							-
GDDM Council (If Council Bollow)	-	***				Date	
SBDM Council (If Council Policy)							
Superintendent						Date	

School	TCCHS		
Activity Account	FFA		
External Support/Booster Organization			
Name of Fundraiser	Painting the Parking Lot Sp		
Sponsor	Julie Gilliam; Brooke White		
Date Submitted	8/6/2018		
Purpose of fundraising activity: The fundraiser will help to provide funding f for the club to help with the costs of travel.	(What will the funds be used for? For activities and events in which the	Be specific) FFA participates as	well as provide mone
Items to be sold: Students will pay a fee to be able to paint/per	rsonalize their parking spot at the hig	h school (see guidel	ines).
Beneficiary of fundraising activity: TCCHS FFA	(Who will receive the benefit of th	e funds)	
Date(s) scheduled: August, 2018 and February, 2019  Names of adult supervisors at activity (chape Julie Gilliam; Brooke White; Alma Guerra (			
Athletic Fundraiser If yes, sport involved: Corresponding sport participating in fundra	tiser?	Yes Yes	No No
Coaches Signature (corresponding sport)			Date
Circle One: Approved Principal	Not Approved	Dat	e Date
SBDM Council (If Council Policy)			Date

Superintendent

Date

Todd Central FFA would like to allow all students to paint their parking spots. Whenever students purchase a parking pass, they would be allowed to pay an additional \$40 to paint their personal spot. All designs will need to be approved by Julie Gilliam, FFA Advisor, and Alma Guerra, FFA President. If any designs are painted that are vulgar or against the official guidelines, the FFA Executive Committee will paint over these spots. The Executive Committee will also be responsible for all cleanup. We would like to take two Saturdays out of the month of August and two Saturdays out of the month of February to host "Painting Days." This will allow the students who get their license in the middle of the school year to paint their spots. Allowing students to paint their spots will help them to see their spots better and will eliminate the need for people to steal other's parking spots. We will be advertising this for all students at Todd Central and we will encourage people to buy their passes early so they will be able to attend our "Painting Days."

#### **RULES**

- 1. No spray paint.
- 2. Must use household latex paint.
- 3. All designs ust be approved.
- 4. Must paint in your spot only- do NOT cover lines!
- 5. No offensive language, pictures, or symbols. No negative or rude language. No gang signs, symbols, or affiliation. No controversial characters or sayings. No double meanings. (If these items are painted, they will immediately be painted over and the student will pay a \$25 fine.)
- 6. You are allowed to use your name only. No boyfriend, girlfriend, or best friend names allowed.
- 7. No sharing parking spots.
- 8. Everyone must check in with their approved design, parking pass, and agreement form before they begin to paint.

#### **HELPFUL HINTS**

- Paint your parking spot white before you paint your design to allow the color to be vibrant.
- You do not have to paint your entire spot.
- Draw your design with chalk first.

### PARKING SPOT AGREEMENT FORM

- 1. Upon arrival to the "Painting Day," I will check in with my approved design, an updated parking pass, and the agreement form before I begin to paint.
- 2. I know I am not allowed to spray paint my parking spot.
- 3. I will only paint my assigned parking spot and will not cover the lines.
- 4. I know I will have to bring my own materials.
- 5. I will only park and paint my assigned parking spot, never anyone else's.
- 6. I will not paint anything that is vulgar or unapproved or else I will be charged an additional \$25 fine and I will not be allowed to repaint my spot.
- 7. I will only paint on Todd Central's Painting Days.

Student Signature	
Parent SIgnature	
Approval Signature	

Attach design to this form or sketch design on back of form.

School	TCCHS		
Activity Account	Girls Soccer		
External Support/Booster Organization			
Name of Fundraiser	Fancloth Sales		
	Katie Rose Covington		
Sponsor Section 144	6-Aug-18		
Date Submitted	o ring 10		
Purpose of fundraising activity: to purchase items for the girls soccer team su	(What will the funds be used for ch as uniforms, equipment, & for ba	? Be specific) inquet	
Items to be sold: Apparel			
Beneficiary of fundraising activity: Girls Soccer Team	(Who will receive the benefit of t	the funds)	
Date(s) scheduled: Fall 2018 End of August  Names of adult supervisors at activity (chape Katie Rose Covington, Holly Lawson	erones, custodians, etc.):		
Athletic Fundraiser If yes, sport involved Girls Soccer		Yes x	No
Coaches Signature corresponding sport)	iser?	Yes	No
Circle One: Approved	Not Approved	Date	
Principal		Da	
SBDM Council (If Council Policy)			nte
Cunavintandant		Da	ite

Superintendent

School	TCCHS	
Activity Account	Girls Soccer	
External Support/Booster Organization		
Name of Fundraiser	Donation Letters	
Sponsor	Katie Rose Covington	
Date Submitted	6-Aug-18	
Purpose of fundraising activity: to purchase items for the girls soccer team suc	(What will the funds be used for h as uniforms, equipment, & for ba	? Be specific) nquet
Items to be sold: None Asking for donations		
Beneficiary of fundraising activity: Girls Soccer Team	(Who will receive the benefit of t	he funds)
Names of adult supervisors at activity (chaper Katie Rose Covington, Holly Lawson	rones, custodians, etc.):	
Athletic Fundraiser If yes, sport involved Girls Soccer		Yes x No
Corresponding sport participating in fundrai	ser?	Yes No Date
Coaches Signature (corresponding sport)  Circle One: Approved	Not Approved	Date
A cartal	NAME OF TAXABLE PARTY.	Date
Principal		Date
SBDM Council (If Council Policy)		Date
		Date

Superintendent

School	TCCHS	
Activity Account	Girls Soccer	
External Support/Booster Organization		
Name of Fundraiser	Mums Sales	
Sponsor	Katie Rose Covington	
Date Submitted	6-Aug-18	
Purpose of fundraising activity: to purchase items for the girls soccer team su	(What will the funds be used for? ich as uniforms, equipment, & for bar	Be specific) aquet
Items to be sold: Selling Mums		
Beneficiary of fundraising activity: Girls Soccer Team	(Who will receive the benefit of the	ne funds)
Date(s) scheduled: Fall 2018 End of September  Names of adult supervisors at activity (chapter Katie Rose Covington, Holly Lawson	erones, custodians, etc.):	
Athletic Fundraiser		Yes x No
If yes, sport involved Girls Soccer		
Corresponding sport participating in fundra	iser?	Yes No
14		8-6-18
This (		8-6-1X
Coaches Signature (porresponding sport)		Date
Circle One: Approved	Not Approved	Date
10 1110		Date
Principal		Date
SBDM Council (If Council Policy)		Date
Sport Council (II Council I oney)		
Superintendent		Date

School	Todd County Central High School	8
Activity Account	Athletic - Boys Soccer	
External Support/Booster Organization	Boys Soccer	
Name of Fundraiser	Fall Mum Sale	
Sponsor	Colby Bicksler	
Date Submitted	8/6/18	"
Purpose of fundraising activity: This is soccer's fall fundrasier which is used used to play soccer and to train for soccer.	(What will the funds be used for? Be sp to purchase sports equipment (balls, nets, t	
Items to be sold: Mums grown by The Bloomery	# # # # # # # # # # # # # # # # # # #	
Beneficiary of fundraising activity: Highschool Boy soccer players	(Who will receive the benefit of the fur	nds)
Names of adult supervisors at activity (chap Colby Bicksler - coach Andrea Jones - Soccer Booster club treasure		
	Water State of the Control of the Co	
Athletic Fundraiser		Yes X No
	ccer	
Corresponding sport participating in fundra	aiser? Soccer	Yes X No
MOLDER BIRDAN		8-5-18
Coaches Signature (corresponding sport)		Date
Circle One: Approved	Not Approved	
Approved	Not Approved	Date
Principal		Date
SBDM Council (If Council Policy)	2	Date
Superintendent		Date