

SCHOOL ACTIVITY FUND FUNDRAISER APPROVAL

School	GOS
Activity Account	
External Support/Booster Organization	
Name of Fundraiser	Ties and Tiaras
Sponsor	4th Grade Team
Date Submitted	

Purpose of fundraising activity:

To raise money for the students. This money will be used to purchase item for students of GOS.

Items to be sold:

Admission tickets

Beneficiary of fundraising activity:

GOS students

Date(s) scheduled:

2-8-19

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

4th Grade team and volunteer staff and teachers

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 type="checkbox"/>
Coach's signature (corresponding sport)	Date	

Circle One: Approved

Disapproved

Date:

10.19.18

Date

Principal

SADM Council (If council policy)

Date

Superintendent as directed by Board
(If School-Wide fundraiser)

Date