

Must be received at Central Office NLT than Wednesday (1 week prior) to the board meeting

FUND RAISING FORM

Simpson County Schools

School: FSMS

Activity Fund: Volleyball

Sponsor: Brandon Eubanks

Date Submitted: _____

What grade range will be involved in this activity? 6th-8th

State the one MAIN purpose of this fund raising activity (how will students benefit from participating in this activity?):

☒ Educational experience ☐ School spirit ☐ Community service

☒ Fund Raising ☐ Other: _____

Describe Activity: Flags for cars, gardens, houses; Kona Ice Drive-Thru
T-shirts; car-decals; discount cards, car wash

Beneficiary of fund raising activity: FSMS Volleyball Team

Place of Activity: _____

Date(s) of Activity: Aug. 21 - Sept. Time(s) of Activity: _____

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

Brandon Eubanks; Derby Link

Principal

Date

SBDM Council (if Council Policy)

Date

Superintendent

Date

Board Approval Date _____ Not Approved