

BOOSTER GROUP OFFICER INFORMATION

Year: <u>2022</u>	FEIN# <u>27-3328142</u>
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Please fill in the name, address and phone number of all newly elected or returning officers of your booster group. Please send this information as soon as your officers have been elected, deadline for having this information to the school principal is September 1st or within the first thirty days of the first transaction of the organization. You should keep a copy for the Booster Group records as well.

Name of Group King Middle School Baseball

Name of School and Principal KMS - Jason Bryant
 School Address 937 Moberly Rd Harrodsburg, KY 40330

Name of Organization KMS Baseball Boosters

Organization President Lindsey McGuffey
 Address 50 Oakland Lane Harrodsburg, KY 40330
 Phone (606) 324-2644 E-mail lindsey.mcguffey@cootlook.com

Name of Vice President Amanda Payton
 Address 564 Bradshaw Lane Harrodsburg, KY 40330
 Phone (859) 319-7512 E-mail amanda.payton@merc.kyschools.us

Name of Secretary Brenna Wilson
 Address 1855 Danville Rd Harrodsburg, KY 40330
 Phone (859) 325-5796 E-mail brenna.wilson@merc.kyschools.us

Name of Treasurer Karen Waford
 Address 754 Beaumont Ave Harrodsburg, KY 40330
 Phone (606) 229-6963 E-mail Karen101us@aol.com

If your organization President changes any time during the year, please notify the Principal at once.

** Please attach a copy of your External Support Organization's proof of liability insurance coverage. **

Athletic Booster Club Agreement

This Agreement is entered into by and between the Mercer County Board of Education (hereafter referred to as "Board") and an entity known as King Middle School Booster Club (hereafter referred to as the "Booster Club"). Through this Agreement, the parties intend to set forth the Terms and Conditions under which the Booster Club may operate and associate with students, teachers, coaches and school administrators at Mercer (KMS) school.

TERMS AND CONDITIONS

1. The Booster Club acknowledges that the Board is responsible for the promotion of education and the general health and welfare of all students attending the Mercer County Public Schools. In addition, the Booster Club acknowledges that the Board has control and management of all school funds and all public school property in its district and may use its funds and property to promote public education (KRS 160.290). The Board and Booster Club acknowledge that the purpose of Booster Clubs is to assist and support but not to direct, interfere with, nor supplant the staff, existing activities, or athletic programs.
2. The Booster Club acknowledges that its activities may affect compliance with Title IX of the Educational Amendments of 1972 (Title 20, U.S.C. §§ 1681-1687, et seq.) by King Middle school and the Board. Likewise, the Booster Club acknowledges that, as a condition of membership in the Kentucky High School Athletic Association, representatives of King Middle school and the Board must verify that the school complies with Title IX (702 KAR 007.065, Section 2[13]). Accordingly, the Booster Club agrees to provide all information requested by King Middle school, the Board, or the Kentucky High School Athletic Association for purposes of determining Title IX compliance. The Booster Club further agrees to refrain from engaging in any activity which, in the opinion of the Principal and Athletic Director of King Middle school or the Superintendent of the Mercer County Public Schools, adversely affect the school's or the Board's ability to comply with Title IX.
3. Booster Clubs shall submit to the Principal a request to be recognized by the Board for the upcoming fiscal year. This request shall include by-laws, list of officers with their phone numbers and addresses, statement of objectives, and designated representatives for purposes of communicating with and providing true and accurate information to the Board and school Principal. The above information will be furnished within thirty (30) days of the first transaction of the group.
4. Upon request of the Principal or Athletic Director of King Middle school or upon the request of the Superintendent, the Booster Club shall make available a full and complete list of its members.
5. In addition to complying with the requirements of Title 702 of the Kentucky Administrative Regulations, Chapter 3:130 (internal accounting), and all other relevant statutes and regulations, the Booster Club shall provide, upon the request of the Principal or Athletic Director of King Middle school or upon the request of the Superintendent/designee, a full and complete accounting of all moneys raised, as well as a full and complete accounting of all moneys expended and shall provide an annual report to the Principal no later than July 15 for the fiscal year ended June 30. In addition, if requested to do so, the Booster Club shall also provide audited financial records concerning its activities.
6. Requests for fund-raising activities shall be directed in writing to the school Principal for his/her approval within the first thirty (30) days of school. These requests should be planned and approved by the Booster Club as reflected in the Booster Club minutes submitted with the requests. Additional requests during the year must be submitted to the school Principal for approval a minimum of thirty (30) days prior to the fund-raising activity.
7. No solicitation of funds or requests for donations shall be conducted by a Booster Club without approval of the school Principal. All receipts, and invoices related to approved fund-raising activities must be made available upon request for review by the school Principal and/or Superintendent/designee. A fund-raising report must be made available to the school Principal at the close of each activity.

The Booster Club shall submit an annual proposed schedule of events to the school Principal at the start of each school year. Events that require school personnel for supervision or custodial work are the responsibility of the Booster Club and must be compensated according to school policy.

SCHOOL ACTIVITY FUND FUNDRAISER APPROVAL

School	King Middle School
Activity Account	Kms Baseball
External Support/Booster Organization	Kms Baseball
Name of Fundraiser	Calendar
Sponsor	
Date Submitted	2-14-22

Purpose of fundraising activity:

Raise Money for teams (sell each of April per player)

Items to be sold:

Each day in April

Beneficiary of fundraising activity:

Kms Baseball

Date(s) scheduled:

April 2022

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

Coaches, Boosters

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"/>
Baseball		
Coach's signature (corresponding sport)	Date	

Circle One:

Approved

Disapproved

Date:



Principal

Date

SBDM Council (If council policy)

Date

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

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	King Middle School
Activity Account	
External Support/Booster Organization	KMS baseball Boosters
Name of Fundraiser	Casa Grande Team Night
Sponsor	Casa Grande
Date Submitted	2/9/22

Purpose of fundraising activity:

Purchase food & needed supplies for team

Items to be sold:

Team will receive 10% of proceeds of sales

Beneficiary of fundraising activity:

KMS Baseball boosters

Date(s) scheduled:

Dates available through Casa Grande - 3/14 & 3/15 or 3/21 & 3/22 (Only doing one night)

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

N/A

Athletic Fundraiser	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes, sport involved:	Baseball
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Coach's signature (corresponding sport)	2-11-22
	Date

Circle One: Approved Disapproved Date:



Principal

Date

SBDM Council (If council policy)

Date

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

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	<u>King Middle School</u>
Activity Account	
External Support/Booster Organization	<u>Kms Baseball boosters</u>
Name of Fundraiser	<u>Bumblebee Apparel</u>
Sponsor	<u>Bumblebee</u>
Date Submitted	<u>2/9/22</u>

Purpose of fundraising activity:

Raise money for boosters

Items to be sold:

Team apparel

Beneficiary of fundraising activity:

Kms Baseball boosters

Date(s) scheduled:

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

N/A

Athletic Fundraiser	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes, sport involved:	<u>Kms Baseball</u>
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/> No <input type="checkbox"/>
<u>Rushin</u>	
Coach's signature (corresponding sport)	Date

Circle One: Approved Disapproved Date:

9/25
Principal

Date

SBDM Council (If council policy)

Date

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

Date

**SCHOOL ACTIVITY FUND
FUNDRAISER APPROVAL**

School	King Middle School
Activity Account	
External Support/Booster Organization	KMS Baseball Boosters
Name of Fundraiser	Krispy Kreme Doughnuts
Sponsor	Krispy Kreme Doughnuts
Date Submitted	2/9/22

Purpose of fundraising activity:

Raise money for boosters

Items to be sold:

Doughnuts


Beneficiary of fundraising activity:

KMS Baseball Boosters

Date(s) scheduled:

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

N/A

Athletic Fundraiser		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If yes, sport involved:	KMS Baseball		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
			
Coach's signature (corresponding sport)		Date	

Circle One: Approved Disapproved Date:



Principal

Date

SBDM Council (If council policy)

Date

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

Date

On Tue, Feb 1, 2022 at 6:40 PM Wilson, Brenna <brenna.wilson@mercerkyschools.us> wrote:

Officers were voted upon and elected as follows:

Lindsey McGuffey President
Amanda Payton Vice President
Karen Waford Treasurer
Brenna Wilson Secretary

The current bank account will be accessed by the treasurer and a report will be provided at the next PTO Meeting.

PTO will participate in fundraisers that all players must participate in. The High School baseball team will add us to one upcoming fundraiser where donations are collected by players. More information to come.

A PTO remind thread will be created.

Team Information Provided by the coaches:

Head Coach Russell Sims
Assistant Coach Brian Sims

Season officially begins Feb 15th

First game is March 23rd

As of now 23 games are on the schedule and Russell Sims head coach is finalizing.

Workouts are Monday, Tuesday, and Wednesday afterschool until 4:30 at the complex

Practices are Monday night 6:00-8:00, Friday after school until 5:30, and Sunday 2:00-4:00 at the complex

Practice will not be cancelled unless school is cancelled. And some no school days will have practice. Only follow coach messages for cancellations.

The High School Baseball team is having a store where we will also purchase from. There will be a team packet of practice shirts and other items to purchase.

Cleats do not need to be a specific brand.

Players will need to purchase pants. Colors to be decided by the coaches later. Jerseys are provided by the High School Team.

There will be both an A team and a B team. Each players' playing time is not to be discussed by parents to coaches. The players' work ethic and effort at practice will determine playing time.

Within the week, players need to have physicals on file and updated physicals if they are expiring.

Player rules and family information sheets were distributed. These must be signed and returned by both the family members and players within the week.

Brenna C. Wilson

Interdisciplinary Early Childhood Educator

Mercer County Elementary School

Sent from my iPhone

**SCHOOL ACTIVITY FUND
MONTHLY / ANNUAL FINANCIAL REPORT**

School <u>KMS</u> <u>KMS Baseball Boosters</u>	Month <u>Feb.</u> Year <u>2022</u>
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Activity Account	Beginning Balance	Receipts	Expenditures	Ending Balances
	3070.41			
	3070.41			
			Insurance 155.	2915.41
			Checks 34	2881.41

Reconciliation			
Beginning Balance	3070.41	Balance Per Bank Statement	
Add: Receipts		Add: Investment Balance	
Subtotal:		Add: Deposits in Transit	
Less: Expenditures		Subtotal	
Ending Ledger Balance	*	Less: Outstanding Checks	
		Other Adjustments (Explain)	
		Actual Cash Balance	*
		Add: Accounts Receivable	
		Less: Accounts Payable	
		Add: Petty Cash	
		Total Balance	
June Report is considered the Annual Financial Report			

The above information is a true statement of the financial condition of the various activity fund accounts of this school.

Principal

Date

School Treasurer

Date



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/02/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Whitenack & Souder Insurance, Inc. 204 South Main Street Harrodsburg, KY 40330	CONTACT NAME: Greg Souder	PHONE (A/C, No, Ext): 859-734-4358	FAX (A/C, No): 859-734-4350
	E-MAIL ADDRESS: gsouder@whitenacksouder.com		
INSURED King Middle School Baseball Boosters	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Fireman's Fund Insurance Company		21873
	INSURER B : Nationwide Life Insurance Company		66869
	INSURER C :		
	INSURER D :		
	INSURER E :		
INSURER F :			

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			XPk80998373 NANPO0054407	2/3/2022	2/3/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES \$ 100,000 MEDICAL EXPENSE \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A						WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Sexual Misconduct Liability			NANPO0054407	2/3/2022	2/3/2023	1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Evidence of Insurance Only

CERTIFICATE HOLDER

CANCELLATION

Evidence of Insurance Only

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Robert V. Nuccio