

## BOOSTER CLUB FUNDRAISING APPROVAL

Date: \_\_\_\_\_ School: \_\_\_\_\_

Teacher/Staff/Advisor \_\_\_\_\_

Project Time Frame: From \_\_\_\_\_ To \_\_\_\_\_

### PROJECT DESCRIPTION

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### FUNDS ARE TO BE USED FOR

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is Travel Required? Y or N If yes, follow policies 2320, 3300, 8131 and/or 8132.

Account Code \_\_\_\_\_

Booster Club Representative \_\_\_\_\_ Date \_\_\_\_\_

After receiving the above signatures this form will go  
to the District Office for final approval.

Building Administration \_\_\_\_\_ Date \_\_\_\_\_

**Must be approved ninety days before the event .**