

San Felipe Del Rio CISD
PTO - Booster Club Fund Raising Form

Sponsoring Organization (PTO - Booster Club): _____ Date Received: _____
Type of Fund-Raising Activity (i.e., candy sale): _____
Date of the Activity: _____
Time of the Activity: _____
Place of the Activity: _____
Name of the person or people who will be handling the money for the fund-raiser: 1) _____
2) _____
3) _____
4) _____

Purpose of the Fund-Raising Activity (detailed description):

Intended Use of Funds:

1. PTO - Booster Club President	Date	
		Approved ()
2. Athletic Director, if athletics	Date	Denied ()
		Approved ()
3. Campus Liaison/Principal	Date	Denied ()

Note: PTO/Booster Club desiring to conduct a fund-raising activity for the school shall submit this form to Isela Valdez at least 14 days prior to the event