BOOSTER CLUBS AND SCHOOL SUPPORT ORGANIZATIONS

REGISTRATION AND APPROVAL FORM

Name of Organization:		-
School:		
Purpose of Organization:		
Student Group to be supported:		
Faculty Sponsor for Club:		-
Current Number of Parent Supporters:		-
I agree with the following statements:		
 I have spoken with the faculty member organization and have received the 	•	• •
 I have read the Booster Clubs and Sch agree to abide by the rules and gui 		nes thoroughly and
 I understand that noncompliance wit disbanding of the support organizat 	, , ,	
Submitted By:		
Representative	Date:	
Representative Address:		_
Representative Phone Number:		-
Sponsor	Date:	

BOOSTER CLUBS AND SCHOOL SUPPORT ORGANIZATIONS

OFFICER INFORMATION

Submit officer information to your supporting campus/department immediately following your organizations' election. Information should be submitted even if officers have not changed from the previous year. Any changes that occur during the year prior to the next election should be reported utilizing this form. A copy of this form should also be maintained by the organization.

School Year:
School Supporting:
President:
Home Street Address
Email Address:
Phone Numbers:
Vice President:
Home Street Address:
Email Address:
Phone Numbers:
Secretary:
Home Street Address:
Email Address:
Phone Numbers:
Treasurer:
Home Street Address:
Email Address:
Phone Numbers;
Fidelity Bond for PTO/PTA Treasurer is attached: Yes No
IRS Employer Identification No. for PTO/PTA's: