

APPLICATION FOR BOARD SANCTIONING

(Booster Clubs, Parent-Teacher Organizations (PTOs) and other Associations)

Name of Organization: _____ Date: _____

Mailing Address of Organization: _____

Purpose of Organization: _____

What group(s) of students and/or school program(s) will this organization benefit?

How will the District and/or its students benefit if this organization is sanctioned?

Are there membership requirements to join the organization? Yes* No

* If yes, please detail below. _____

Who are the Officers of the organization?

President: _____

Vice President: _____

Treasurer: _____

Secretary/Other: _____

Does the organization have its own Tax Identification Number? Yes* No

* If Yes, what is the number? _____

Does the organization have its own liability insurance? Yes* No

* If Yes, who is the carrier? _____ Policy #: _____

ACKNOWLEDGEMENT

We, the Officers of _____, affirm this organization does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations. These activities include, but are not limited to, the selection of volunteers, benefits to students, vendors and provision of services.

We also agree to all of the terms and conditions for sanctioned parent booster clubs, parent/guardian-teacher organizations (PTOs) and/or other associations set forth in the Choctaw-Nicoma Park School Board policies and regulations.

Signed this _____ day of _____, 20_____.

Organization President

Organization Vice-President

Organization Treasurer

Organization Secretary/Other

FOR DISTRICT USE ONLY:

Date Application Received: _____ Reviewed by: _____

Recommended for Sanctioning? Yes No

Comments: _____

Superintendent (or Designee)

Date Signed