

Sample Booster Auxiliary Organization Application

(School District Name)

Booster Auxiliary Organization Application

Application Date: _____

Booster Auxiliary Organization Name: _____

Name of School: _____

Check one: Initial Application Renewal:

The parents of Sample School District hereby requests approval for the formation of the

_____ Booster Auxiliary Organization.
Name of Organization

Objectives / Purposes of the Booster Auxiliary Organization are: _____

Booster Auxiliary Organization Official Mailing Address:

Official Name: _____

PO Box/Street: _____

City/State/Zip Code: _____

Telephone Number: _____

Booster Auxiliary Organization Officers:

Position Held	Name	Email Address

Is the organization a 501(c)(3) tax-exempt? Yes No

Organization Tax ID # _____ Banking Institution: _____

Does the booster auxiliary organization conduct annual financial audits/reviews? Yes No

Attach a copy of your proposed budget for the upcoming school year.

Upcoming School Year Planned Meetings (or attach schedule):

Date	Time	Location

Upcoming School Year Planned Fundraisers (or attach schedule):

Activity	Date	Location

We, the members of this booster auxiliary organization, have read and understand the rules for forming and conducting this organization, including the district's board policy and administrative regulations, and agree to abide by them. We will submit a contact list and two copies of the proposed constitution and bylaws to the principal/school administrator or designee, who will review the application for approval, as well as any other information required by the district.

Signature of Organization President Date

District/School Site Approvals:

Principal/School Administrator: _____
 Signature Date

District Board Recognition and Approval:

District Administrator: _____
 Signature Date

Title: _____