Series 3000: Operations, Finance, and Property

3100 General Operations

3106-F Booster Clubs, PTOs, and Other Support Groups

All support groups are required to complete this form annually by September 15th, whether operating within the District or as a separate legal entity. Please complete the following information and proceed to the applicable section as indicated below.

☐ New support group	☐ Renewal of existing support group
Name of Support Grou	ip:
Contact Person Name	
Phone:	Email:
	on or Title:
Program or Activity Su	pported:
Please indicate the sta proceed to the appropr	atus of the support group (as understood by the applicant) and late section:
☐ Internal Support G Complete Section	roup (e.g., parent/guardian group operating within the District). A.
☐ External Support Complete Section	Group (e.g., booster club, PTO, other separate legal entity). B and Acknowledgment and Release Form.
Section A: Internal Su	ipport Groups
Building of Operation:	
Describe mission or pheld (if applicable):	urpose and identify common activities, events, and fundraisers
Signature:	Date:
	Title:
Primary Staff Contac	

Section B: External Support Groups

Contact Person Name);		
Contact Person Title:			
Address of Entity:			
Phone:		Email:	
		dopted:	
Date of Formation:*	(use date	approved by State of	Michigan, if applicable)
Date of Formation.	(use date approved by State of Michigan, if applicable) (attach copy of IRS confirmation or approval letter)		
EIIN: Banking Institution: _	(andon a	opy 0, 11 to comm	,,
pending approvals):			
Note: If any of the abo noce completed, a new Date of Annual Meeti	w or updated form r ing and Election of (nust be submitted to t Officers:	
lote: If any of the abo	w or updated form r ing and Election of (nust be submitted to t Officers:	ne District.
lote: If any of the abo nce completed, a new Date of Annual Meeti Name and Contact In	w or updated form r ing and Election of one information of Curre	Officers:	ne District.
lote: If any of the abornce completed, a new Date of Annual Meeti Name and Contact In Title	w or updated form r ing and Election of one information of Curre	Officers:	ne District.
lote: If any of the abo ince completed, a new Date of Annual Meeti Name and Contact In Title	w or updated form r ing and Election of one information of Curre	Officers:	ne District.
lote: If any of the aborce completed, a new Date of Annual Meeti Name and Contact Ir Title President Vice President	w or updated form r ing and Election of one information of Curre	Officers:	ne District.
Note: If any of the abornce completed, a new Date of Annual Meeti Name and Contact In Title President Vice President Treasurer Secretary	w or updated form r ing and Election of one information of Curre	Officers: Phone	Email

Form.

For internal Use: Date Received:	Received by: Printed Name:		
□ Approved □ Denied Superintendent:		Date:	
If approved or denied by Board of E	Education, date of Boa	ard Meeting:	

Acknowledgement and Release Form Booster Clubs, PTOs, and Other Legally Separate Parent/Guardian Groups

By executing this Acknowledgement and Release Form ("Acknowledgment"), I certify that I am an authorized representative or officer of the parent/guardian group identified below ("Organization"). On behalf of the Organization, which is operated as a separate legal entity from the District, I certify the following:

I have read and understand District Policy 3106 related to the policies and procedures applicable to our Organization. Further, the Organization will comply with all applicable board policies, guidelines, and procedures in its operations. I certify on behalf of the Organization that the Organization will not represent to any third party that it is an agent of the District or has any authority to act on behalf of the District.

The Organization is currently a properly formed separate legal entity (or is in the process of becoming a separate legal entity) as indicated on District Form 3106-F. As a separate legal entity, the Organization certifies that our Organization: (1) has established a legal entity through the State of Michigan; (2) obtained an employer identification number (EIN) through the Internal Revenue Service and does not utilize the District's EIN for any purpose; and (3) has established a separate bank account in the name of the Organization.

As a legally separate entity, our Organization is fully responsible for compliance with all applicable state and federal law. I further acknowledge and understand that the District does not require the Organization to obtain tax-exempt status as a 501(c)(3) or other form of charitable organization and that this is a decision of the Organization. Information provided by the District is general in nature and should not be construed as legal advice. The Organization is solely responsible for consulting with appropriate professionals on legal, tax, accounting, and other compliance matters, as deemed necessary by the Organization, including whether tax-exempt status would be beneficial for the Organization.

District personnel may participate in the Organization's events and activities on a voluntary basis but may not be required to participate. I further understand and acknowledge that the Organization is responsible for safeguarding all funds raised by the Organization and will adopt written procedures or internal controls related to funds in order to minimize opportunities for fraud or abuse. Under no circumstances will the District be liable for the failure of the Organization to properly safeguard funds or for losses associated with fraud or misuse of funds. Events and activities, including fundraisers, held by the Organization are not District sponsored events and the District will not be held liable for such events or activities.

By execution of this Acknowledgment, I certify on behalf of the Organization that I have read and understand this Acknowledgment and the Organization shall release and hold the District harmless from liability arising from the operation of the Organization, including liability related to events and activities, failure to comply with applicable law, financial losses incurred, including those resulting from fraud or similar acts, and other liability associated with the Organization's operations.

Name of Organization:	
Signature:	Date:
Printed Name:	Title: