Waco Independent School District

Parent Organization/Booster Club Registration & Approval Form

To:Location:				
(Principal or Admini	strator's Name)	(Sch	ool's or Departme	ent's Name)
Name of Organization:				
Purpose of Organization:				
Student Group to be Supported: _				
Faculty Sponsor:				
Current Number of Parent/Volunt	eer Supporters:			I
agree with the following statemen	ts:			
I have spoken with the faculty me Club and have received their pern			e Parent Organiza	tion/Booster
I have read the Parent Organiza and guidelines it contains. I und requirement may result in the d Administrator.	lerstand that nonc <mark>om</mark>	pliance with any V	Waco ISD, state o	or federal
I underst <mark>and t</mark> hat our organization comp <mark>liance w</mark> ith Waco ISD polici	W / - V /	1(c)(3) exempt orga	anization in order t	to be in
I have attached a completed Parer Determination Letter or a signed s 501(c)(3) has been or will be filed need to include a letter of good stanumber.	statement stating an A l within the school year anding from their umb	pplication for Reco ar. Instead of the De orella organization s	gnition of Exempt etermination Letter stating their group	ion under Sec.
Submitted by:	HOOL	DIST	RICT	
_	//		,	//
(President/Representative #1)	Date	(Vice-President/Re	epresentative #2)	Date
(Treasurer/Representative #3)	// Date	(Sponsor)	/	Date
	For District	t Use Only		
Received by:			Date Received	1 1

		_
APPROVAL OF PARENT ORGANIZAT	<u>ION/BOOSTER CLUB:</u>	
I, (Principal's or Administrator's Name)	<u>, </u>	at
(Principal's or Administrator's Name)	(Position)	
	authorize	
(School or Department Name)	authorize (Parent Organization/Booster Club name)	
to conduct student and organizational relate	ed activities for the benefit of	
The re	egistration approval is effective for the school year	
	e until such time as the Parent Organization/Booster L, state, or federal requirements or when the Parent s.	
		
(Principal's or Administrator's Si	gnature) Date	
DICADDROVAL OF BADENT ODCAN	TA TION DOOGTED OF LID.	
DISAPPROVAL OF PARENT ORGAN	IZATIUN/BUUSTER CLUD:	
I,(Principal's or Administrator's Name)	,at (Position)	
(Timesper 8 of Testimose and T	(Lostron)	
	do not authorize	
(School or Department Name)	do not authorize (Parent Organization/Booster Club name	e)
to conduct any student and organizationa		
10 0011000 3111, 33000 3110 318	1014104 404 11111	
1	, , ,	

The original form should be sent to a representative of the Parent Organization/Booster Club shown on the front of this form. Please make copies of BOTH PAGES of this form for:

Date

(Principal's or Administrator's Signature)

- The Sponsor
- The Principal or Administrator
- The Internal Audit Department