



# LOS ALAMITOS UNIFIED SCHOOL DISTRICT

## 2024-25 Application for Booster Club

**NEW** Application

Annual Renewal Application

Change to Board Officers

### I. GENERAL INFORMATION

Name of Organization		School Site	
Mailing Address		Date Requested	
		Booster Web Address	

### II. EXECUTIVE BOARD OFFICERS

	Name	Address	Phone	Email	Term End Date
President					
Vice President					
Secretary					
Treasurer					

### III. PURPOSE (Describe the purpose of the organization)


### IV. ANNUAL OBJECTIVES (List specific goals for the school year)


### PRELIMINARY APPROVAL

This certifies you have satisfied sections I thru IV. Please complete remaining sections and resubmit for Final Approval. You are not authorized to operate as a booster organization until all sections have been satisfied and signature for final approval is received from the school site administrator.

Initials School Site Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

**V. FINANCIAL INFORMATION**

Name of Bank		Account Number	
Address of Bank		Authorized Signers	
Tax ID # (EIN)			

**VI. REQUIRED DOCUMENT (Attach copies)**

- |  |  |
|--|--|
| <input type="checkbox"/> Booster Club Constitution/Bylaws                                | <input type="checkbox"/> 501 (c)(3) Federal Determination Letter (if applicable) |
| <input type="checkbox"/> Booster Bank Information Form                                   | <input type="checkbox"/> Hold Harmless Agreement                                 |
| <input type="checkbox"/> Proof of Tax ID #   | <input type="checkbox"/> Certificate of Insurance                                |
| <input type="checkbox"/> Booster Club Manual Acknowledgement Form signed by each Officer | <input type="checkbox"/> Additional Insured Endorsement                          |
|  | <input type="checkbox"/> Application for Fundraising (if applicable)             |

**FINAL APPROVAL**

This certifies you have satisfied all sections of the Los Alamitos Unified School District Application for Booster Club. Authorizations are granted per school year. You must resubmit your application annually to continue to operate as a booster organization.

School Site Verification Booster Club Workshop Attendance:

Name of Attendee \_\_\_\_\_ Date of Attendance \_\_\_\_\_

School Site Administrator Signature of Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Date: From \_\_\_\_\_ To \_\_\_\_\_

*\* School Site - Provide a copy of the completed booster application (excluding attachments) to Business Services Attn: Shoshana Dornblaser*

**DENIED APPLICATION**

Based upon the information submitted on this application the Los Alamitos Unified School District hereby denies the Application for Booster Club.

Signature of School Site Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

Rationale: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**A booster organization reserves the right to re-apply once the basis for denial has been remedied.**