

CLUB PAPERWORK CHECKLIST

SCHOOL YEAR 2022-2023

CLUB NAME: _____

NEW CLUB

SPONSOR: _____

EXISTING/RENEWING

Please complete the following items prior to submitting Club Paperwork.

- Certified Staff Sponsor Signature _____
- Complete District Club Sponsor Training
- Club Authorization Form
- Club Sponsorship and Financial Agreement (Co-Sponsor must complete also)
- Authorization to Pool and Expend Interest Earnings – SA Funds (Co-Sponsor must complete also)
- Booster Info (If you have a booster club)
- Club Constitution (even if this is an existing club)
- Club Meeting Schedule

****Club Minutes, Club Members, Permission slips, Conference passes-please keep these! They belong to you. Please keep a copy of your constitution.

Paperwork must be turned in to Administration prior to conducting club meetings/activities and spending any club monies.

To be completed by Administration

Club _____

Approved _____

Not Approved _____

Sponsor _____

Club Account Number _____

School Year _____

Michelle Good

Date

CLUB AUTHORIZATION

(Paperwork required each year for New and Existing Clubs)

(Check one box below)

New Club

Existing Club

Date _____

Club Name _____

School Site Location _____

Previous Club Name (if changing) _____

School Site Location _____

Club purpose as stated in the club Constitution (required):

No financial transactions will be processed unless this form has been completed and is on file with the Student Activity Administrator-Accounting at District Office Accounting Dept.

All Sponsors and Co-Sponsors must be listed below:

Sponsor's Name (Please print) _____

Co-Sponsor's Name (Please print) _____

Co-Sponsor's Name (Please print) _____

Co-Sponsor's Name (Please print) _____

Is the club charging an ECA (extra-curricular activity) fee? Yes No Enter Amount \$ _____

I need club codes for: Tax Credit: Yes No Student Activity: Yes No Auxiliary: Yes No
(UCA fee is being collected=Yes) (We plan on doing fundraisers=Yes) (Field trips/separate class fee=Yes)

Club course code: _____

Revenue code: _____
Revenue code: _____
Revenue code: _____
(District office will assign codes)

To be completed after 1st club meeting.

Club Officers' Names (required):

President (Required)
Vice President (Optional)
Secretary (Required)
Treasurer (Required)
Other (Optional): _____

This form must be submitted to the Admin. Asst./Bookstore Manager immediately after the club's 1st meeting.

School Principal's Signature (required)

Bookstore / Admn. Signature

Date

Authorization to Pool and Expend Interest Earnings Student Activities Funds

The _____ club, of _____ School hereby authorizes the Chandler Unified School District to perform the following with regard to student activities funds maintained on deposit:

- Pool funds into a single bank account with the District's Contracted Financial Institution;
- Invest funds in accordance with ARS 35-313 "Investment of Trust Monies";
- Establish a single account to hold earnings from investments/interest;
- Pay common expenses for the good of all student activity clubs including but not limited to:
 - Bank deposit slip printing;
 - Blank check printing;
 - Standard forms printing (1099/Revenue Reports/etc.);
 - Training manual printing/copying;
 - Organizational materials required by all clubs, and;
 - Necessary and prudent banking service fees.
- Other expenses necessary for the administration of the Student Activities of the Chandler Unified School District.

Interest earnings will be pooled throughout the fiscal year. At year-end, interest balances in excess of \$1,000 will be allocated to all active clubs based on their average quarterly balance for the fiscal year. Interest will not be allocated to clubs having a negative (deficit) average quarterly balance.

Club Sponsor Signature	Date	Co-sponsor Signature	Date
Co-sponsor Signature	Date	Co-sponsor Signature	Date

BASHA HIGH SCHOOL

FEE PROPOSAL FORM

Name of Activity/Club/Sport: _____

Coach and/or Sponsor: _____

FEE FOR: (see 2nd page for ECA Fee Schedule)

Category A – Trip – Field Trips and Competitions

Participation/ECA Fees

Category B – Athletics

Category C – Competitive Performing Arts & Athletic Clubs

Category D – All Other Extracurricular Activities

Destination: _____

Date/Season: _____

Fee/Amount: _____

Description/Justification: _____

Coach/Sponsor Signature: _____

Activities/Athletic Signature: _____

Principal Signature: _____

Date of Approval: _____

Copy to Bookstore: _____

Copy for Website: _____

SUBSTITUTE VENDOR INVOICE

(for Student Activities)

Date: _____

Company/Organization Name: _____

Address: _____

Email Contact/Phone #: _____

INVOICE TO:

CHANDLER UNIFIED SCHOOL DISTRICT, NO. 80
1525 WEST FRYE ROAD
CHANDLER, AZ 85224

Account Code: _____

Requisition #: _____ School Site: _____

Date Services Rendered: _____

Description of Services: _____

TOTAL \$ _____

(Product/services Received)
Sponsor's Signature

(OKAY TO PAY) Sponsor's
Signature

Date

(Product/services Received)
Student Officer's Signature

(OKAY TO PAY) Student
Officer's Signature

Date

Detailed description of services and legible signatures (sub vendor invoice), club minutes, a donation letter from the club to the charity explaining why they are donating, and flyer showing organization is a 501 C3 charity are required to process.

School _____
CLUB MINUTES

Club Name _____ Date _____

Taken By: _____ Meeting Opened: _____ AM / PM

By: _____ Seconded: _____

Members Present:

Misc. Business:

Motions:

1. Made by: _____ Seconded by: _____

Amount Approved \$ _____ Motion Passed Yes / No

2. Made by: _____ Seconded by: _____

Amount Approved \$ _____ Motion Passed Yes / No

3. Made by: _____ Seconded by: _____

Amount Approved \$ _____ Motion Passed Yes / No

4. Made by: _____ Seconded by: _____

Amount Approved \$ _____ Motion Passed Yes / No

5. Made by: _____ Seconded by: _____

Amount Approved \$ _____ Motion Passed Yes / No

6. Made by: _____ Seconded by: _____

Amount Approved \$ _____ Motion Passed Yes / No

7. Made by: _____ Seconded by: _____

Amount Approved \$ _____ Motion Passed Yes / No

8. Made by: _____ Seconded by: _____

Amount Approved \$ _____ Motion Passed Yes / No

Meeting closed at _____ AM / PM

By: _____ Seconded _____

Student Officer Signature

Date

Sponsor Signature

Date

Student Officer Name Printed

Sponsor Name Printed

Minutes must include:

- Club Name & Date, School, Members Present, Dollar amount approved,
- Item approved to buy and student officer and Sponsor Signatures.

Club Members

CUSD PERMISSION FORM TO PARTICIPATE IN EXTRA-CURRICULAR ACTIVITES

(PLEASE RETURN THIS FORM TO THE SPONSOR)

BASHA HIGH SCHOOL

2021-2022

Please Print Information

STUDENT NAME _____ DAY MEETING TIME _____

NAME OF CLUB _____ SPONSOR _____

My child has permission to participate in the above after school activity/club. I understand transportation is not provided.

Parent/guardian Name _____ Daytime phone and/or cell phone # _____

Alternate Emergency Contact _____ Daytime phone and/or cell phone# _____

If activity is sports related (example: hiking club), Physician's name and phone# _____

Parents Signature: _____ Date: _____

Email address: _____

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BASHA HIGH SCHOOL

2021-2022

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Alternate Emergency Contact _____ Daytime phone and/or cell phone# _____

If activity is sports related (example: hiking club), Physician's name and phone# _____

Parents Signature: _____ Date: _____

Email address: _____

CONFERENCE HOUR CLUB PASS

Scheduled Meetings

Club Name:

Advisor:

Extention

Location of Meeting:

Student Name _____ ID # _____

CONFERENCE HOUR CLUB PASS

Scheduled Meetings:

Club Name:

Advisor:

Extension:

Location of Meetings:

Student Name _____ ID # _____

CONFERENCE HOUR CLUB PASS

Scheduled Meetings:

Club Name:

Advisor:

Extension:

Location of Meetings:

Student Name _____ ID # _____

Clubs are usually held during Conference on Wednesday (green passes) or Thursday (gold passes).
Some Clubs meet after school. Please indicate below choice of meeting times for your club.

CLUB NAME _____ ROOM # _____

CLUB SPONSOR _____ EXTENTION _____

1ST /3RD WEDNESDAY

2ND/4TH WEDNESDAY

1ST/3RD THURSDAY

2ND/4TH THURSDAY

AFTER SCHOOL: DAY _____ ONCE A WEEK
1ST/3RD OR 2ND/4TH ONCE A MONTH (MON. – FRI.)