



Booster Club Agreement to Rules and Regulations

In order for groups to co-op with the Centurion Foundation (CF), each group will have a designated **Booster Liaison**, Booster Club Chair, and Coach/Sponsor.

I, _____ representing _____ (sport/club) agree to be the Booster Liaison.

The Booster Liaison should initial the paragraphs below to indicate that you have read, understood and will follow the Booster Club Procedures Manual.

_____ (initial) **Booster Clubs must obtain written permission from UCHS** via the CF for any fundraising activity by completing the CF Fundraising Request form and submitting it to the CF Club Liaison. **You cannot begin your fundraising activity or publicize it until the Principal has signed the request form and you receive a signed copy of approval from CF.**

_____ (initial) Deposits are be made by the club's Booster Liaison at Chase Bank. The club Booster Liaison will forward a copy of the bank deposit receipt and the CF Deposit Verification form to deposit@uc-centurionfoundation.com.

_____ (initial) CF will reimburse valid club expenses submitted by the Booster Liaison. The Booster Liaison fills out a CF Expenditure Reimbursement Form and has your Booster Club Chair sign for the expenditure. Receipts with the CF Expenditure Reimbursement Form are required and should be sent to the reimbursement@uc-centurionfoundation.com.

_____ (initial) **School rules prohibit CF from paying coaches, referees, and individuals for services.** Payment/salaries to coaches, referees, and individuals are paid by the school. CF can then reimburse the school.

_____ (initial) I understand that I need to request liability insurance from CF for any tournament, event, on campus rental or off campus rental to protect my booster parents, students, and CF. Money can only be deposited into CF's account if the event or fundraiser is insured under CF.

_____ (initial) I understand all the rules including those related to CIF, payment of coaches, contracts, gifts, overnight events, raffles, tournaments, and uniform/spirit packs.

_____ (initial) I will inform my Booster Club of the school, district, state, federal, insurance, and Centurion Foundation rules to help keep everyone safe and maintain the 501(c)(3) non-profit status.

_____	_____	_____	_____
Booster Liaison Name (required)	email	Signature	Date
_____	_____	_____	_____
Booster Club Chair Name (required)	email	Signature	Date
_____	_____	_____	_____
Coach/Sponsor (required)	email	Signature	Date

Please email this form to treasurerliaison@uc-centurionfoundation.com or place the form in the Centurion Foundation mailbox in the UCHS office.