

GOOSE CREEK CISD
Booster Club Guidelines Receipt

Name: _____

Organization's Name: _____

I hereby acknowledge receipt of the GCCISD Booster Club Guidelines and viewing of the Booster Club Guidelines Presentation. I agree to read the handbook and abide by the standards, policies and procedures defined or referenced in this document.

Signature

Date

NOTE: Please sign, date, and return this form to the campus principal.