



## Governing Board Agenda Item

---

Meeting Date: June 12, 2025

From: Caitlyn Kauffman, Marana High School Principal

Subject: Booster Club

Priority: To ensure that students are safe, known, and valued

Consent ☒ Action ☐ Discussion ☐

---

### Background:

Marana High School is requesting approval of the following booster club. Below is a description of the booster club, as written by Shawn Lara, coach/sponsor.

Marana Flag Football Booster Club: To promote the love of women's flag football and to raise money to support the flag football team.

### Recommended Motion:

I move that the Governing Board approve the formation of the Marana Flag Football Booster Club at Marana High School.

Approved for transmittal to the Governing Board:

A handwritten signature in black ink, appearing to read 'D. Streeter'.

Dr. Daniel Streeter, Superintendent

*Questions should be directed to: Caitlyn Kauffman, Marana High School Principal*  
*Phone: (520) 616-6400*

**MARANA UNIFIED SCHOOL DISTRICT NO. 6**  
**APPLICATION FOR CHARTERING/RE-CHARTERING**  
**A PARENT/CITIZEN ORGANIZATION**

Check one: ☒ This is an initial request to seek approval for a new organization.  
☒ This is a renewal charter of a previously approved organization.

YEAR OF CHARTER/RE-CHARTER 2025-2026

*NOTE: All fundraisers are subject to approval by the Principal/Site Designee according to Governing Board policies.*

NAME OF ORGANIZATION Marana Flag Football Booster Club

NAME OF SCHOOL OR GROUP AFFILIATED WITH Marana High School

PURPOSE OF ORGANIZATION To promote the love of Womens  
Flag Football & Raise money for the Club.

MEETING DATE AND PLACE Marana Football Field Booster Club

**OFFICERS:**

PRESIDENT: Stephanie Linen Signature [Signature]

Contact Information: 11349 W. Stone Haven 520 709 0543  
Address Telephone Number E-Mail Address

VICE PRESIDENT: Celeste Valenzuela Signature [Signature]

Contact Information: 12864 N. Signature 520 979 7899  
Address Telephone Number E-Mail Address

SECRETARY: Monica Roebuck Signature [Signature]

Contact Information: 16188 W Gold Bell Rd 520-904-6715  
Address Telephone Number E-Mail Address

TREASURER: Lindsay Brawn Signature [Signature]

Contact Information: 8741 N. Shadow Wash Way 520-400-5475  
Address Telephone Number E-Mail Address

**APPROVAL:**

Principal or Site Designee's Signature [Signature]

*This form must be submitted to District Administration by June 30<sup>th</sup> of each year.*

*Sent 5/27/25*