



Activity Purpose Summary

Albert Lea Area Schools 241

Date: 08-20-25 Name of Activity: National Honor's Society

Purpose of Activity: To Equip + Empower Student Leaders

Grade(s) of students who will benefit from Activity: 11th + 12th

Student activities are in nature by the students and for the students. The Advisor role is limited to advising only. The students should be making the decision regarding the allocation of the funds.

I, Carissa Blizzard (advisor) have read and understand the attached rules and policies. I acknowledge my responsibilities for assuring proper procedures are followed.

Carissa Blizzard
Advisor's Name (printed)

[Signature]
Advisor's Signature

8-20-25
Date

Sean Gaston
Principal's name (printed)

[Signature]
Principal's Signature

9/3/25
Date

Upon termination of the above named activity, any unobligated funds that remain in the account will be transferred to: Student Council

Carissa Blizzard
Advisor's Name (printed)

[Signature]
Advisor's Signature

8-20-25
Date

Michaela Hanson
Student Rep's name (printed)

[Signature]
Student Rep's Signature

Date

Sean Gaston
Principal's name (printed)

[Signature]
Principal's Signature

9/3/25
Date



Meeting Minutes and Budget

Albert Lea Area Schools 241

Date: 8-20-25 Name of Activity: National Honors Society

Advisor: Carissa Blizzard

Members Present: Evan, Anna, Kylie, Hanna, Andrew, Vienna Calleigh

Members Absent: None

Budget (revenues should equal expenditures)

Revenues (add up total)
3,454 Starting
Concessions - 1000\$
Snap Raise - 5,000
Small fundraising - 500.00
Total: <u>9,954.00</u>

Expenditures (add up total)
Officer Trip - 5,000
Induction - 200.00
Buddy day 100.00
Total: <u>5,300.00</u>

No contact shall be made or authorized, required payments under the contract must be made by the district following normal district processes. Student activity accounts cannot advertise, solicit and award bids. Proceeds of the revenue from vending contracts must not be deposited in any student activity account.

Approval of the budget

Yes _____ No _____

Other items discussed:

Minutes Approved (print):

Carissa Blizzard
Advisor

[Signature]
Student Rep

Minutes Approved (sign):

[Signature]
Advisor

[Signature]
Student Rep



Anticipated Fundraisers

August 22 2025

Albert Lea Area Schools 241

Date: 8/22/25 Name of Activity: _____

Description of Fundraiser	Purpose of Fundraiser	Approximate Date(s)	Sales Tax? (Yes or No)	Contract involved? (Yes or No)
chuck a Puck	NHS	Hockey day (Jan) Home opener (Nov)	NO	
Volleyball	NHS	First home game?	NO	
Field goal Kicking	NHS	First game	NO	
Fun night booth	NHS	End of semesters?	NO	
Work at store	NHS	Maybe September	NO	yes
Sell food during passing time	NHS	Any time	NO	



Fundraiser Reconciliation

Albert Lea Area Schools 241

Date: _____ Name of Activity: _____

Fundraiser: _____

Student Name	Date	Items Sold	Money Collected	Cash/Check
Total				