

**10 DAY COUNTDOWN!
OCTOBER 21 - OCTOBER 31**



GO TIGERS!

ANNUAL FUND 10 DAY SCHOOL CHALLENGE:

**SCHOOLWIDE POPCORN/MOVIE PARTY IF WE GET
100% STUDENT PARTICIPATION!**

ANNUAL FUND 10 DAY STUDENT CHALLENGE:

ALL STUDENTS WHO RETURN THEIR ANNUAL FUND ENVELOPE WILL GET TO WRITE THEIR NAME ON THE ANNUAL FUND STUDENT CHALLENGE WALL AND WILL APPEAR IN THE 2014-15 YEARBOOK WITH ALL THOSE STUDENTS WHO COMPLETED THE ANNUAL FUND CHALLENGE

ANNUAL FUND 10 DAY BONUS CHALLENGE:

LEVEL ONE BONUS CHALLENGERS:

RAISE A MINIMUM OF \$50.00 FOR THE ANNUAL FUND AND RETURN YOUR ENVELOPE BY OCTOBER 31ST

YOU WILL RECEIVE:

1. AN ANNUAL FUND CHALLENGE T-SHIRT
2. AN OUT OF UNIFORM DAY ON A DAY SPECIFIED BY MR. BIRDSONG.
3. YOU WILL GET TO WRITE YOUR NAME ON THE ANNUAL FUND STUDENT CHALLENGE WALL
4. YOU WILL RECEIVE RECOGNITION AND A CERTIFICATE AT THE ANNUAL FUND CHALLENGE POST EVENT ASSEMBLY.
5. TO APPEAR IN THE 2014-15 YEARBOOK WITH ALL THOSE STUDENTS WHO COMPLETED THE ANNUAL FUND STUDENT CHALLENGE.

LEVEL TWO BONUS CHALLENGERS:

RAISE A MINIMUM OF \$250.00 FOR THE ANNUAL FUND AND RETURN YOUR ENVELOPE BY OCTOBER 31ST.

YOU AND ALL HOUSEHOLD FAMILY MEMBERS WHO ATTEND ST. TERESA WILL RECEIVE:

1. AN ANNUAL FUND T SHIRT
2. AN OUT OF UNIFORM DAY ON A DAY SPECIFIED BY MR. BIRDSONG.
3. YOU WILL RECEIVE "A DAY OFF SCHOOL" AT SCHOOL* DATE TO BE DETERMINED BY MR. BIRDSONG.
4. YOU WILL GET TO WRITE YOUR NAME ON THE ANNUAL FUND STUDENT CHALLENGE WALL.
5. YOU WILL RECEIVE RECOGNITION AND A CERTIFICATE AT THE ANNUAL FUND CHALLENGE POST EVENT ASSEMBLY.
6. TO APPEAR IN THE 2014-15 YEARBOOK WITH ALL THOSE STUDENTS WHO COMPLETED THE ANNUAL FUND STUDENT CHALLENGE.

***YOUR CHILD WILL BE ABLE TO PARTAKE IN AN ORGANIZED "DAY OFF SCHOOL" AT SCHOOL FULL OF SUPERVISED FUN GAMES AND ACTIVITIES. HOT LUNCH WILL BE AVAILABLE.**



FILL OUT & RETURN TO SCHOOL WITH YOUR ANNUAL FUND ENVELOPE TO RECEIVE YOUR REWARD!!



**THE POWER OF ONE...
THE IMPACT OF MANY**



NAME(S) _____

EMAIL _____

CLASSROOM(S) _____

T-SHIRT SIZE(S):
____YS ____YM ____YL
____AS ____AM ____AL ____AXL

AMOUNT DONATED _____

DO YOUR PARENTS WORK AT A COMPANY WHO WOULD MATCH THIS DONATION? _____ IF YES, PLEASE PROVIDE NAME OF EMPLOYER(S) _____

Thank you for your support!