



Center Street School PTA
**Get Together &
Event Chair Training**

Introduction:

Position in PTA (and any others held in the past)

Grade level of student(s) at CSS

How long have you been at the school?

Tell us your favorite place to visit and one place you still hope to get to....



PTA.....What is it and why does it need me?

Unit	Council	District	State	National
CSS	El Segundo	33rd/South Bay	California	USA

- > PTA's mission is to make every child's potential a reality by engaging and empowering families and communities to advocate for all children.
- > PTA Values: collaboration, commitment, diversity, respect and accountability



PTA & Ed! Foundation

Area of support	PTA	Ed! Foundation
STEM	Legos & Software	Teacher
Music	Instruments, Conference	Teacher
P.E.	Equipment (balls, scooter boards, jerseys, etc.)	Teacher
Computer Science	Computers, paper and carts	Teacher

PTA pays for stuff... trees, field trip buses & assemblies, books, teacher training, drums, PE equipment, recess equipment, etc.

Ed! pays for people and programs... music teacher, PE teacher, STEM, computer science, and library staff.

We are all fundraising and





COMMUNICATIONS:

How to reach those you
need to reach.....

communications@csspta.com

EMAILS...

- As a chair, you have an alias that ends in @csspta.com
This will forward to your personal email automatically
(please make sure to test this out soon)
- Loop the President and/or VP (cc on all important emails)
- Ask for a reply all or only to reply to you.
- WAIT 24-48 hours on any angry emails, or ask for someone to review your email before sending
- Use bcc: when appropriate
- Acknowledge emails within 24 hours



SOCIAL MEDIA...

- Happy Thoughts!!!
- Tag the President on Facebook on any posts that are school related
- Talk to the PTA President or Principal before posting negative things on social media about a Teacher, Staff or PTA Chair
- When in doubt, loop the President or the Principal in immediately. Most issues can be resolved offline...
~~~~~Online lasts FOREVER~~~~~



# FLIERS / POSTINGS

- All fliers and postings need to be approved FIRST by PTA President
- We have a Communications Chair that you can email to help with outlets (i.e.) FB, mail chimp, Principal emails, website
- We are a GREEN school so we are limiting paper copies and things going home in backpacks (backpack runs are about 775 copies)
- If you are doing a paper flier PTA needs to purchase the paper, don't use school stock (unless it's plain white) and any color copies come out of YOUR budget
- We have a specific place for posting fliers near office
- ONLY use the blue painters tape or magnets to post.  
\*\*\*\*\*NO DUCT TAPE or MASKING TAPE\*\*\*\*\*



# CSS PTA NEWS

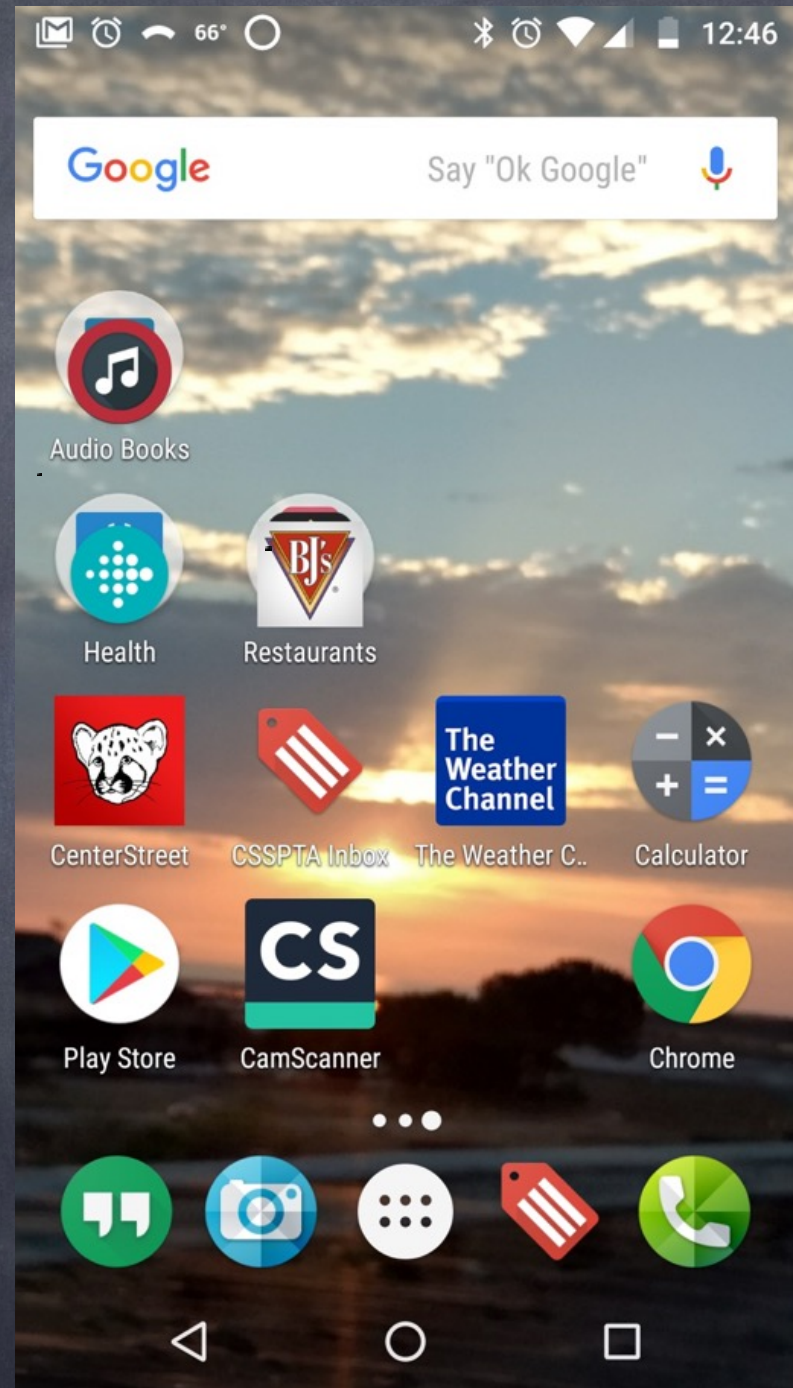
- Principal's emails
- CSS PTA's Newsletters (via email)
- CSS PTA Website: <http://csspta.com/>
- Facebook posts at:  
<https://www.facebook.com/CenterStreetSchoolPTA/>
- Center Street School calendar at:  
<http://www.centerstreetschool.org/>
- Bulletin Board
- Posters on campus (Large & Small)
- CSS PTA App
- Flyers in backpacks or front office





# Got the App???

Feeling a little out of touch and want faster answers and links to everything CSS and PTA?





- PTA? Contact info for PTA & School

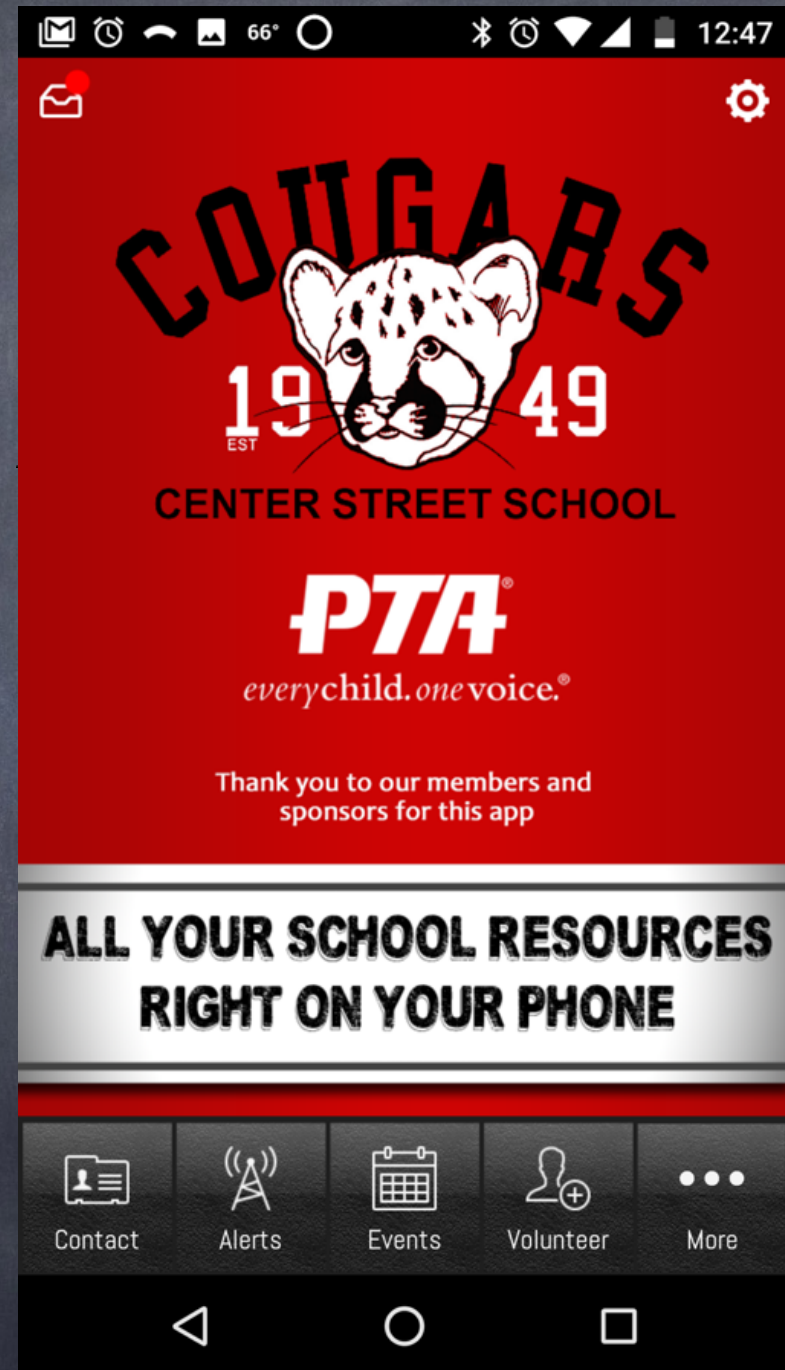
- Events - one touch to take you to Center Street School calendar to see what is going on!

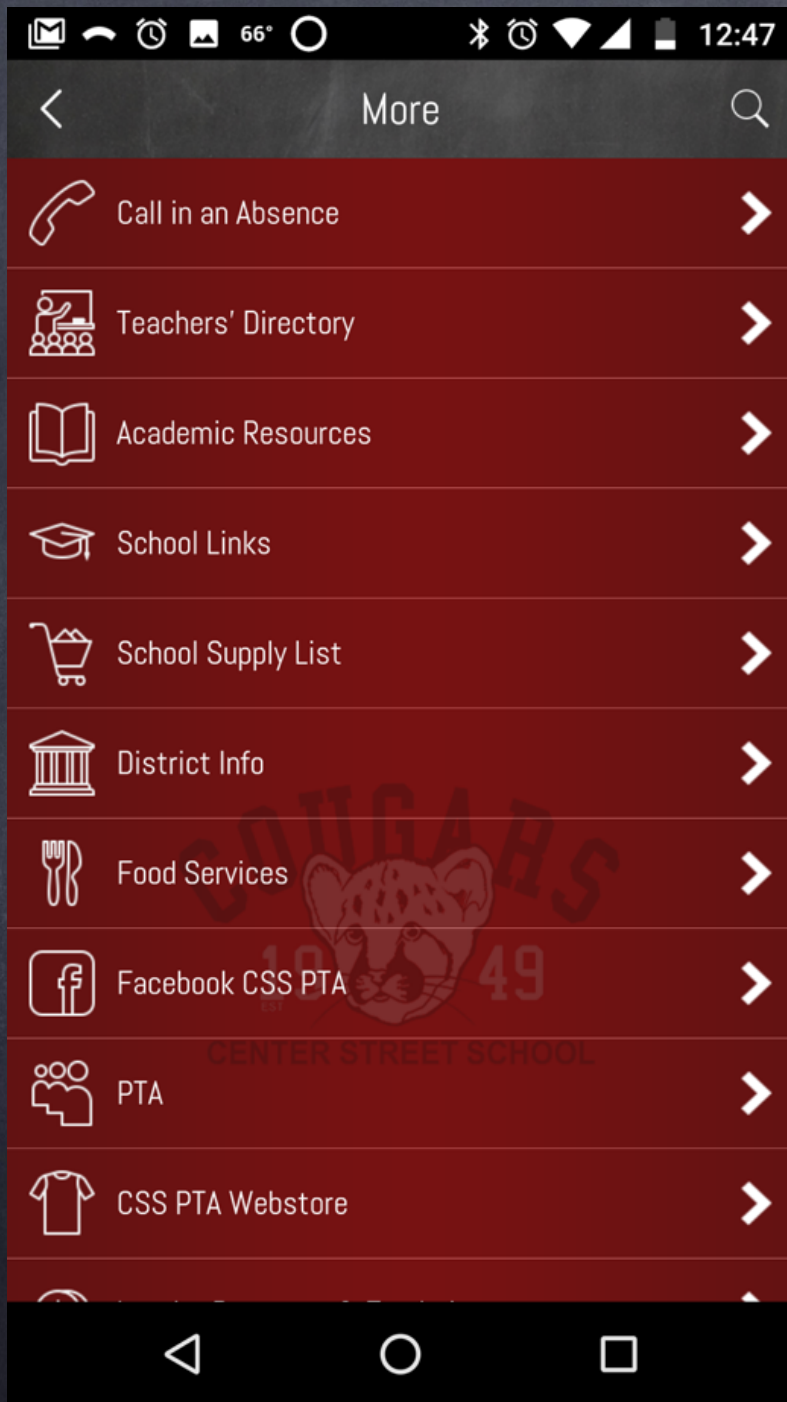
- Volunteer on campus!

- Bell / Lunch Schedule

- Lunch Menu

- And there's more!





Report an Absence

School Links like  
Bell Schedules

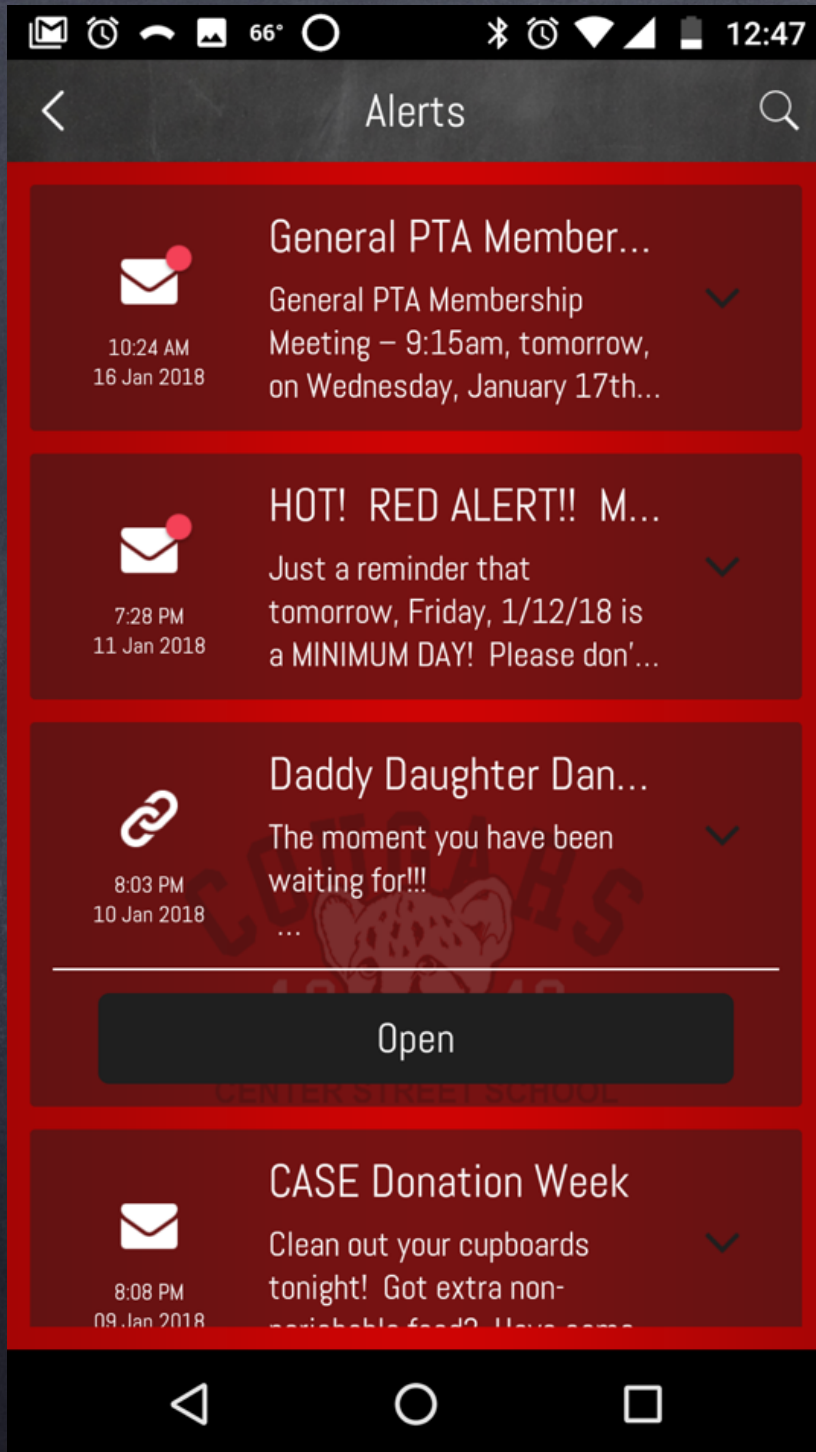
See the lunch  
menu or add \$

What are they saying on  
FB?

Order spirit wear & event tickets

Want to  
have  
**YOUR**  
event  
featured  
here???





## DON'T FORGET THE ALERTS!

- Important reminders pop up to remind you when deadlines are coming up

Want to  
have  
**YOUR**  
event  
featured  
here???





**VOLUNTEERS:**  
How do I get them???



We have a Volunteer Chair that can be reached at  
[volunteers@csspta.com](mailto:volunteers@csspta.com)

The Chair can help you reach those who will be  
best suited for your particular event

CSS Parents

Grade Level Representatives

[signup.com](http://signup.com)

ESHS Students

NCL (National Charity League)

Let the Volunteer  
Chair know at least 4  
weeks before the  
event how many  
volunteers you need!  
DON'T WAIT!!!

VOLUNTEER





## DISCLAIMER:

The volunteer chair is NOT responsible for finding the volunteers for your event....

*Read that again....*

The volunteer chair is there to help you reach the people who will be able to staff your event and to help you oversee (NOT SETUP) your signup.com

If you wait too long to reach out to the volunteer chair, or don't get your signup created soon enough then it **falls to YOU** as the chair to make sure you have the help you need.



Why should I log my hours?



How Do I log my hours?

To Whom do I report my hours?



## How to Log your hours:

1. Raptor Sytem in the Main office
2. Any sign-in's at any PTA meeting
3. Email the historian directly with your hours at [historian@csspta.com](mailto:historian@csspta.com)
4. Email a signup.com report at the end of your event or monthly (for ongoing activities like Grades of Green)







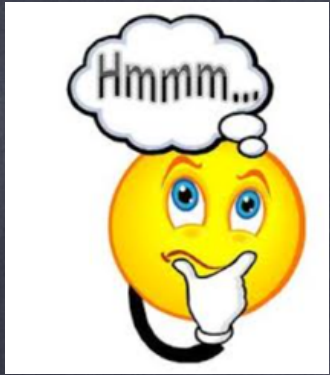
**FINANCIAL:**  
Show me the Money!!!

# SHOW ME THE \$\$!

- Budget
- What to do with receipts
- I need \$\$ for an event / CC swiper
- Counting the \$\$
- Depositing the \$\$ and the PTA Safe







Getting reimbursed for  
\$\$ you've spent / check  
request / paying a bill

Somebody gave me  
something for FREE!!!!

Going over budget -  
Whoops!



1. Fill out  
your name

2. Fill out your  
name or the name  
of the vendor you  
need the check  
addressed to

4. Sign & Date the  
form

5. If you're the  
chair you also need  
to sign here for  
others submitting  
receipts for YOUR  
event.

**PTA**  
everychild.onevoice

### PAYMENT AUTHORIZATION/REQUEST FOR REIMBURSEMENT

ATTACH ALL RECEIPTS TO THIS EXPENSE STATEMENT \*(ONE SHEET PER EVENT)\*

Name of Person Requesting Check \_\_\_\_\_  
 PTA Position (if applicable) \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

**WRITE CHECK TO:**  
 Name of Person/Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

Expenditure was for: \_\_\_\_\_

**List Expenditures:** \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL EXPENSE** \$ 0.00

Total Amount Claimed From Above \$ \_\_\_\_\_  
 Minus Advance Received \$ \_\_\_\_\_  
 Reimbursement Claimed \$ \_\_\_\_\_  
 Not claimed – donate to PTA \$ \_\_\_\_\_  
 Refund to PTA (Enclose Check) \$ \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Chair's Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR PTA TREASURER USE:**

☐ Membership-approved activity ☐ Funds released by membership  
☐ Executive Board-approved expenditure

| Check Number | Category | Amount Advanced | Expenses | Amount Owed or Due |
|--------------|----------|-----------------|----------|--------------------|
|              |          |                 |          |                    |

President's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Date approved in minutes: \_\_\_\_\_ Secretary's signature: \_\_\_\_\_

3. List or Group  
the expenditures.  
Each receipt  
should be listed  
(ok to add an  
addendum on the  
back) and make  
sure to list what  
the expenditure  
was for!

6

6. TAPE your  
receipts to the  
back or add  
another paper. DO  
NOT staple a  
stack of receipts  
to this.



## START UP CASH \$

## COINS

\_\_\_\_\_ x 1¢ = \_\_\_\_\_  
 \_\_\_\_\_ x 5¢ = \_\_\_\_\_  
 \_\_\_\_\_ x 10¢ = \_\_\_\_\_  
 \_\_\_\_\_ x 25¢ = \_\_\_\_\_  
 \_\_\_\_\_ x 50¢ = \_\_\_\_\_  
 \_\_\_\_\_ x \$1 = \_\_\_\_\_

TOTAL \$

**CURRENCY**

\_\_\_\_\_ x \$ 1 = \_\_\_\_\_  
 \_\_\_\_\_ x \$ 5 = \_\_\_\_\_  
 \_\_\_\_\_ x \$ 10 = \_\_\_\_\_  
 \_\_\_\_\_ x \$ 20 = \_\_\_\_\_  
 \_\_\_\_\_ x \$ 50 = \_\_\_\_\_  
 \_\_\_\_\_ x \$ 100 = \_\_\_\_\_

TOTAL \$

UNIT NAME

### ACTIVITY

DATE \_\_\_\_\_

## COINS

\_\_\_\_\_ x 1¢ = \_\_\_\_\_  
 \_\_\_\_\_ x 5¢ = \_\_\_\_\_  
 \_\_\_\_\_ x 10¢ = \_\_\_\_\_  
 \_\_\_\_\_ x 25¢ = \_\_\_\_\_  
 \_\_\_\_\_ x 50¢ = \_\_\_\_\_  
 \_\_\_\_\_ x \$1 = \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

**CURRENCY**

\_\_\_\_\_ x \$ 1 = \_\_\_\_\_  
 \_\_\_\_\_ x \$ 5 = \_\_\_\_\_  
 \_\_\_\_\_ x \$ 10 = \_\_\_\_\_  
 \_\_\_\_\_ x \$ 20 = \_\_\_\_\_  
 \_\_\_\_\_ x \$ 50 = \_\_\_\_\_  
 \_\_\_\_\_ x \$ 100 = \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

**CHECKS** Attach adding machine tape of itemized checks

[illegible]

TOTAL \$ \_\_\_\_\_

GRAND TOTAL \$

### Membership Dues

|   |              |             |                  |                |
|---|--------------|-------------|------------------|----------------|
| # | members @ \$ | (dues) = \$ | + donations = \$ | Grand Total \$ |
|---|--------------|-------------|------------------|----------------|

FOR OFFICIAL USE ONLY

Signature

Signature

Signature

Amount Received: \$

Signature

Date \_\_\_\_\_

I need cash for my event or I will be taking in cash...

1. If you need starting cash (or a CC swiper), fill out the previous form 1 week before the event and email [financialsecretary@csspta.com](mailto:financialsecretary@csspta.com)
2. Check out a cash box(es) 1-2 days beforehand
3. Make arrangements to get the starting cash from the safe (FS or Pres) on the day of the event
4. You must ALWAYS have 2 people counting \$\$ at the start and end of the event. 1 MUST be an executive board member (cannot be related by blood or marriage)
5. All \$\$ is placed in an envelope with this form and placed in the safe at the end of the event.
6. What do I do if the event occurs after hours???



Yes, You need to  
Log Donations...

You can also email the  
treasurer, financial  
secretary, your VP or the  
President to get a  
personalized receipt that  
includes our 501c3 number

**PTA**

everychild.one voice.

## DONATION RECEIPT

Date \_\_\_\_\_

Name \_\_\_\_\_

Cash contribution \$ \_\_\_\_\_

In-kind non-cash items exceeding \$250 in value (description of items):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

"Quid Pro Quo" contributions (Contributions that are made partly as a contribution and partly in payment for goods and services received, for example, a ticket price that is higher than its normal value). For Quid Pro Quo contributions of more than \$75, list item(s) and total amount paid for each.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In consideration of their donation, donor received (e.g., value of meal):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The California State PTA is a tax-exempt nonprofit organization as described in Section 501(c)(3) of the Internal Revenue Code. This exemption applies to all the California State PTA's constituent organizations.

Authorized by \_\_\_\_\_

IRS EIN \_\_\_\_\_

PLEASE RETAIN FOR YOUR TAX RECORDS  
THANK YOU FOR YOUR SUPPORT

## Center Street School PTA

Membership

Calendar

Monthly Calendar View

Volunteer

Ways to get Involved

Main

Other Ways to Help

Programs

Green Team - Grades of  
Green

Trash Free Tuesday! (And  
Everyday!)

Room Parent Resources

Fundraisers

Cougar Spirit Wear

Jog-a-thon

Event Chair Information

FORMS:

LOGOS:

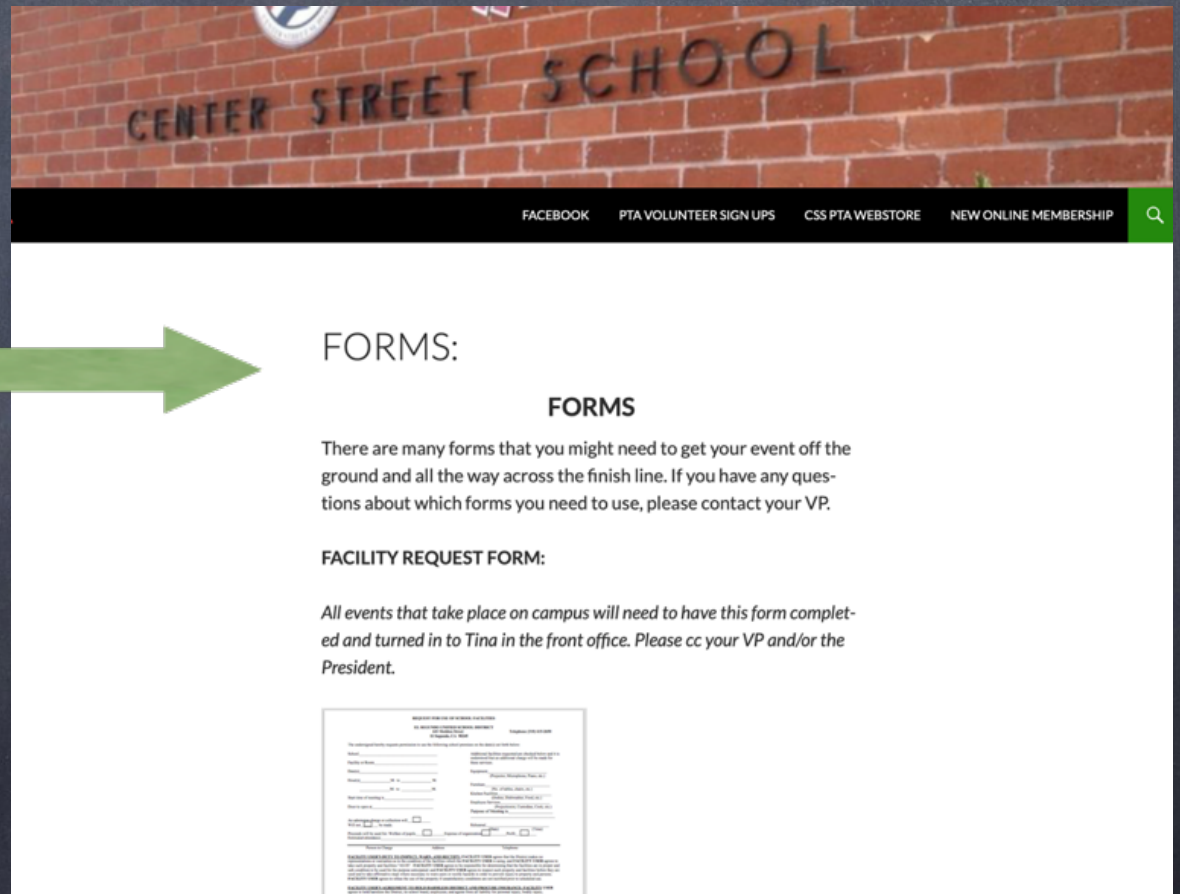
PRESENTATIONS:

Webstore

Contact Us

Blog

ALL forms can be found on  
the [csspta.com](http://csspta.com) website under  
'Forms'



CENTER STREET SCHOOL

FACEBOOK PTA VOLUNTEER SIGN UPS CSS PTA WEBSTORE NEW ONLINE MEMBERSHIP


### FORMS:

#### FORMS

There are many forms that you might need to get your event off the ground and all the way across the finish line. If you have any questions about which forms you need to use, please contact your VP.

#### FACILITY REQUEST FORM:

*All events that take place on campus will need to have this form completed and turned in to Tina in the front office. Please cc your VP and/or the President.*



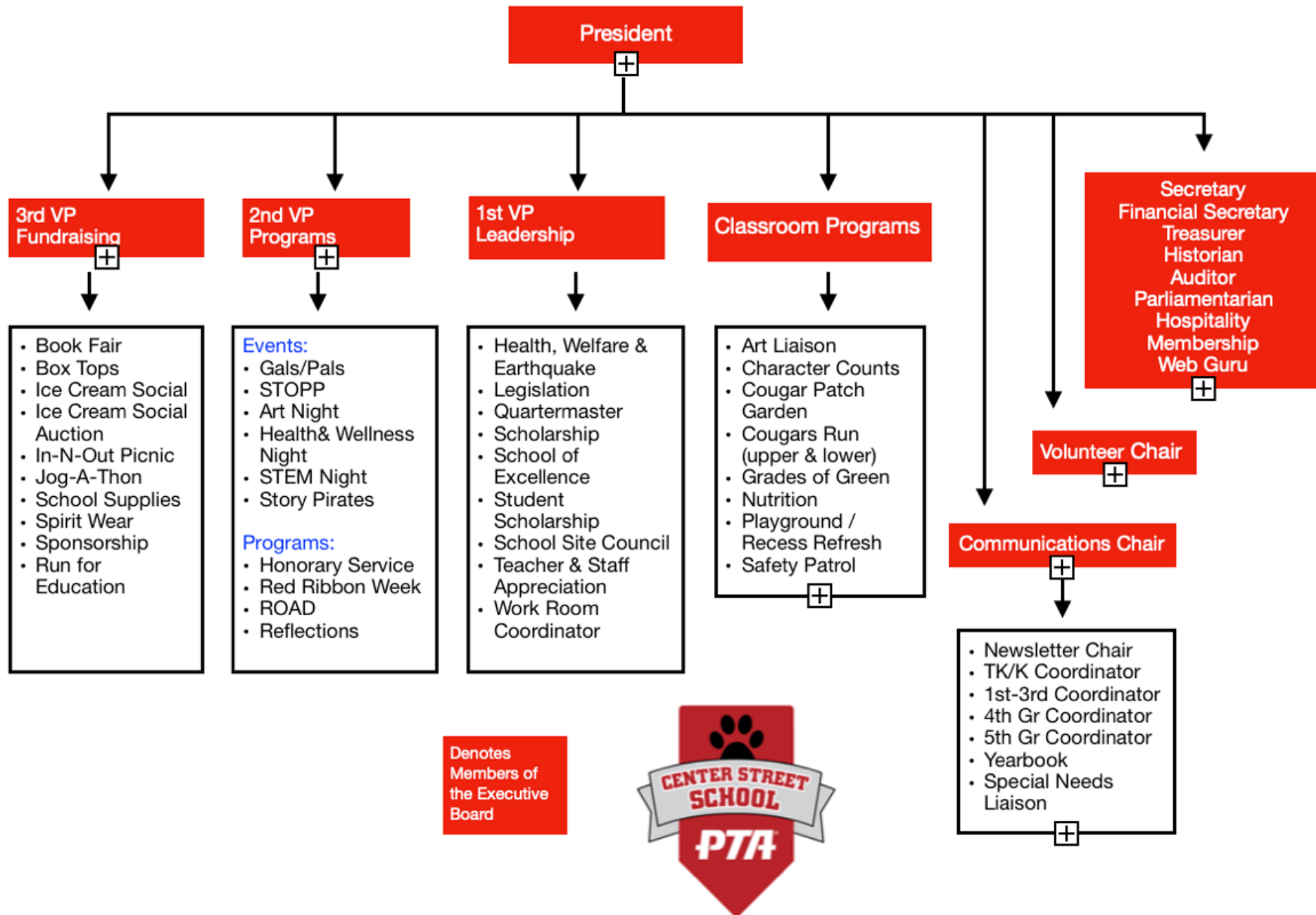




**ADDITIONAL ITEMS**

So you can be in the know....

## Center Street School PTA Organizational Chart





# Facility Request Form

**REQUEST FOR USE OF SCHOOL FACILITIES**

**EL SEGUNDO UNIFIED SCHOOL DISTRICT**  
641 Sheldon Street  
El Segundo, CA 90245

Telephone (310) 615-2650

The undersigned hereby requests permission to use the following school premises on the date(s) set forth below:

|                                                                                                                                                        |                                                                                                                                   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| School _____                                                                                                                                           | Additional facilities requested are checked below and it is understood that an additional charge will be made for these services. |
| Facility or Room _____                                                                                                                                 |                                                                                                                                   |
| Date(s) _____                                                                                                                                          | Equipment _____<br>(Projector, Microphone, Piano, etc.)                                                                           |
| Hour(s) _____ M. to _____ M.                                                                                                                           | Furniture _____<br>(No. of tables, chairs, etc.)                                                                                  |
| _____ M. to _____ M.                                                                                                                                   | Kitchen Facilities _____<br>(Dishes, Dishwasher, Food, etc.)                                                                      |
| Start time of meeting is _____                                                                                                                         | Employee Services _____<br>(Projectionist, Custodian, Cook, etc.)                                                                 |
| Door to open at _____                                                                                                                                  | Purpose of Meeting is _____                                                                                                       |
| An admission charge or collection will <input type="checkbox"/> Will not <input type="checkbox"/> be made.                                             | Rehearsal _____ (Date) _____ (Time)                                                                                               |
| Proceeds will be used for: Welfare of pupils <input type="checkbox"/> Expense of organization <input type="checkbox"/> Profit <input type="checkbox"/> |                                                                                                                                   |
| Estimated attendance _____                                                                                                                             |                                                                                                                                   |
| Person in Charge _____                                                                                                                                 | Address _____ Telephone _____                                                                                                     |

**FACILITY USER'S DUTY TO INSPECT, WARN, AND RECTIFY:** FACILITY USER agrees that the District makes no representations or warranties as to the condition of the facilities which the FACILITY USER is using, and FACILITY USER agrees to take such property and facilities "AS IS". FACILITY USER agrees to be responsible for determining that the facilities are in proper and safe condition to be used for the purpose anticipated; and FACILITY USER agrees to inspect such property and facilities before they are used and to take affirmative steps where necessary to warn users or rectify hazards in order to prevent injury to property and persons. FACILITY USER agrees to refuse the use of the property if unsatisfactory conditions are not rectified prior to scheduled use.

**FACILITY USER'S AGREEMENT TO HOLD HARMLESS DISTRICT AND PROCURE INSURANCE:** FACILITY USER agrees to hold harmless the District, its school board, employees, and agents from all liability for personal injury, bodily injury, contractual liability and damage to property sustained arising out of the activities of the FACILITY USER or those of its officers, employees, agents, or invitees whether such act is authorized by this agreement or not; and FACILITY USER shall pay for all loss or damage to the property of the District. District assumes no responsibility for any property placed on the premises. FACILITY USER further agrees to waive all rights of subrogation against the District. The provisions of this article do not apply to any damage or losses cause solely by the negligence of the District, its officers, employees, or agents. FACILITY USER shall, at its own expense, procure and maintain during the entire period of use of the facility, Comprehensive General Liability insurance acceptable to the district. Such insurance shall name the District, its school board, employees, and agents as additional insured with respect to any liabilities arising from the facility users' use and obligation under this agreement.

**IN ACCORDANCE WITH EDUCATION CODE SECTION 16564-16566, THE FACILITY USER ACKNOWLEDGES THAT THE SCHOOL PROPERTY FOR USE OF WHICH APPLICATION IS HEREBY MADE WILL NOT BE USED FOR THE COMMISSION OF THE GOVERNMENT OF THE UNITED STATES BY FORCE, VIOLENCE OR OTHER UNLAWFUL MEANS. AND THE FACILITY USER IS NOT A COMMUNIST-ACTION ORGANIZATION OR COMMUNIST FRONT ORGANIZATION REQUIRED BY LAW TO BE REGISTERED WITH THE ATTORNEY GENERAL OF THE UNITED STATES. THIS STATEMENT IS MADE UNDER THE PENALTIES OF PERJURY.**

By the Applicant's signature below, the FACILITY USER agrees to all of the terms and conditions stated above. FACILITY USER further acknowledges and agrees to abide by all rules and regulations and policies as set forth on this and the reverse side of this application which governs the use of the District's facilities and the conduct of all meetings. FACILITY USER further acknowledges that facility use is contingent upon full compliance with these rules as well as any site rules specified by the site administrator.

|                                               |                                                                                                                        |
|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| <b>For District Use</b>                       | <b>Name of Organization</b> _____                                                                                      |
| Approved as to schedule:                      | Address _____                                                                                                          |
| Principal _____ Date _____                    | Telephone _____                                                                                                        |
| Rental Fee (must be paid in advance) \$ _____ | Signed by _____                                                                                                        |
| Approved: El Segundo Unified School District  | Title _____                                                                                                            |
| By _____ Date _____                           | Home Address _____                                                                                                     |
| District employees assigned _____             | Telephone _____                                                                                                        |
|                                               | Organizations may be required to submit evidence of registration with the Secretary of State.                          |
|                                               | NOTE: Please read and comply with the rules, regulations and policies as forth on the reverse side of this application |
| Comments _____                                |                                                                                                                        |

At least 1 month prior to your event you need to fill out this form to request the space on campus and items to assist your event (ie. tables, electrical, trash cans, etc.

You can attach a separate sheet if you need to list items or include a map

Give HARD COPY of this form to Tina Vergara in the front office at [tvergara@esusd.k12.ca.us](mailto:tvergara@esusd.k12.ca.us) and cc the PTA President and your VP