



## 2008-2009 Sammamish S.T.E.P.S. Kick Off!!

### Sammamish Totems Enrichment Program Supporters

- S.T.E.P.S. (formerly the SHS Booster Club) is a parent support group and the primary fundraising body for all SHS cultural, academic, social and athletic activities and organizations.

**SINCE 2006, S.T.E.P.S. HAS RAISED AND GIVEN BACK OVER \$50,000 TO THE SHS COMMUNITY!!**

Sports Related - \$23,500	Student Support - \$11,000	Clubs - \$2,850
Academics - \$9,200	Music and the Arts - \$11,000	Health - \$1,500

- Membership is open** to all interested parents, staff, alumni and members of the community at large. There are no membership requirements or fees.
- At the start of the school year S.T.E.P.S. helps fund the student planners and helps with start-up needs for clubs, groups and staff. **Our goal is to kick off the new year by raising an initial \$5,000.**
- Meetings are held jointly with PTSA; **First meeting Monday, Sept. 8 at 7pm in the SHS Library.**

**PLEASE JOIN US!!**

### Upcoming S.T.E.P.S. and School Events

- September 2, Tuesday – First Day of School*
- September 8, Monday – First S.T.E.P.S./PTSA Meeting*
- September 17, Wednesday – SHS All School Curriculum Night*
- September 19 -20 – Homecoming Weekend*
- October 13, Monday – S.T.E.P.S./PTSA Meeting*

Questions should be directed to S.T.E.P.S. President, Roy Steinberg at [roy@steinbergsite.com](mailto:roy@steinbergsite.com)



**S.T.E.P.S. REPLY FORM (Cut here and return to address listed below)**

**Yes! I would like to help S.T.E.P.S. kick start the school year and support SHS students!**

\$10.00   
  \$50.00   
  \$250.00   
  Plus Company Matching Funds (please provide form)  
 \$25.00   
  \$100.00   
  Other

I would like to volunteer for \_\_\_\_\_ (Examples: Sell Totem Wear during football games; help with concessions at Magic Season Ice Rink, help with the auction, and much more.)

Please add my email address to the STEPS email list so I can receive monthly information.

I would like to be contacted to see what volunteer opportunities exist.

Name of Adult Family Members: \_\_\_\_\_

Address: \_\_\_\_\_

Home phone: \_\_\_\_\_ email address: \_\_\_\_\_

SHS Student Name(s)/Grade(s) \_\_\_\_\_

**Return this form to the S.T.E.P.S. box in the Activities Office (Room 103) or mail to:**

**S.T.E.P.S., 100 - 140<sup>th</sup> Ave. S.E., Bellevue, WA 98005**

**S.T.E.P.S. is a registered 501(c)3 non-profit organization in Washington State.**