



ATHLETIC BOOSTER CLUB

FUNDING REQUEST FORM

Date: _____
Team: _____
Contact: _____ Phone #: _____
Email: _____

EXPLANATION FOR REQUEST (NEEDS & BENEFITS)

TOTAL AMOUNT REQUESTED: _____

ITEMIZATION OF MATERIALS/EQUIPMENT (ALSO ATTACH RELEVANT QUOTES OR PRICING)

BUSINESS(ES) ACCEPTING TAX EXEMPT STATUS (SEE KEVIN HINSON FOR FORM)

ATHLETIC BOOSTER REVIEW

DATE RECEIVED: _____
DATE OF EXECUTIVE BOARD REVIEW: _____ ACCEPTED/DENIED
DATE OF BOOSTER CLUB VOTE: _____ ACCEPTED/DENIED