

San Lorenzo



Valley



High School Athletic Boosters

REQUEST FOR BOOSTER FUNDS

PROCEDURE - Fill out this form with two quotes and submit to the Athletic Director (AD). Once reviewed, approved, and signed by AD, it must be presented to Boosters at the next Boosters meeting. Requests must be presented in person by the coach. Requests will be accepted at any monthly meeting and voted on at the following monthly meeting. Filling out this form does not guarantee funding.

SPORT/GROUP: _____ LEVEL: _____

Name of Coach: _____ Phone: _____

Total funds needed: \$ _____ Date funds are needed: _____

Amount Requested from Boosters: \$ _____

Balance of ASB account: \$ _____ Amount used from ASB account: \$ _____

Balance of Bingo account: \$ _____ Amount used from Bingo account: \$ _____

If you are not using funds from your ASB and/or Bingo account, please explain why. _____

Briefly describe the request and attach two (2) quotes or invoices:

Please describe your group/teams involvement in Booster Activities and Fund raising efforts or other fund raising activities, e.g., core bingo parents, Booster Board parents:

Coach Signature: _____ Date: _____

Athletic Director Signature: _____ Date: _____

Date presented to Boosters: _____ Date Approved/Declined: _____