Interlake High School Booster Club

Financial Request Form

DATE:_____

Sport/Activity:_____Coach:_____

Parent Rep:_____Phone:_____

ASB Budget Allocation:_____

Participation Fees: (anticipated/collected)_____

Explain how your ASB allocation and participation fees are being spent:_____

_____

ITEMS NEEDED(list in order of priority, attach a separate sheet if necessary):	**AMOUNT**
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total of items:	$ _____
less funds from(ASB OR OTHER)_____	_____
AMOUNT REQUESTED FROM BOOSTER CLUB	$ _____

Fundraising Plans:(1/2 of requested must be paid back to Booster Club in a timely manner)	**AMOUNT**
_____	_____
_____	_____
_____	_____
_____	_____
Total Fundraising:	_____

Future Needs: (list in order of priority)	**AMOUNT**
_____	_____
_____	_____
_____	_____
_____	_____

All requests forms must be completed, signed by the athletic director and presented to the Board of Directors. Requests will be placed on the agenda for a vote of the general membership after they have been reviewed by the Board of Directors. Each month the Board of Directors reviews each funding request for accuracy and completion of the process at Board of Director's meetings which are scheduled for the Monday preceding each regularly scheduled General Booster Club Meeting. General meetings are held on the 3rd Monday of every month.

APPROVAL: _____ _____

Athletic Director **President- IHS Booster Club**

REVISED 5/17/01– By D. Simmonds