



FREEMAN HIGH SCHOOL ATHLETIC BOOSTER CLUB

COACH OR ADVISOR REQUEST FOR FUNDS/ASSISTANCE

TEAM/ACTIVITY _____

COACH/ADVISOR REQUESTING _____ DATE _____

OF PARTICIPANTS IMPACTED _____ AMOUNT REQUESTED _____

YOU MUST ATTACH COPY OF INVOICE, QUOTE OR OTHER PRICING VERIFICATION SHOWING FINAL COSTS. PLEASE DO NOT SUBMIT REQUEST WITHOUT PRICE VERIFICATION.

PURPOSE OF REQUEST:

OTHER FUNDING SOURCES (USE OF TEAM FUNDS, OTHER PARENT GROUP MONIES, ETC.):

DISCUSSION POINTS/THINGS WE SHOULD KNOW ABOUT THIS REQUEST:

NOTE 1: Please be aware that September 30 is the deadline for all requests to be paid; contact the Booster President if you'd like to request an extension.

NOTE 2: Requests should be made in person by the coach/advisor at the appropriate meeting to allow for questions from Executive Board and should include hard copy evidence of total price including any shipping/handling/taxes/other costs. The Executive Board has the final approval.

FOR FHS ATHLETIC BOOSTER CLUB USE ONLY

Is the requesting coach or advisor a Member or given assistance to the Boosters? YES NO

Funding Approved: YES NO Amount \$ _____ Date Funds Issued _____