

MPH

ATHLETICS

Athletic Booster Club Funds Request

Team: _____

Coach: _____ Email: _____

Parent Rep: _____ Email: _____

Description of request (please detail your budget request, include specific information such as: kinds of materials and equipment needed, any shipping costs and supply sources, annual or ongoing expenses):

Date Submitted: _____ Total Amount requested: \$ _____

Athletic Director's Decision on above request

Date Reviewed: _____

- Approve
- Disapprove
- Approve with changes below
- Need more information

Comments/Changes:

Signature of Coach _____

Signature of AD _____

Review with Boosters _____

Booster Treasurer Signature _____

Accepted Date _____