



REQUEST FOR FUNDING FORM

1. Review your ASB team account for funds.
2. Discuss request with Athletic Director
3. Complete this form and submit with Athletic Director's signature
4. Attach a copy of the estimate from a credible source
5. Requests must be submitted at least one week prior to the next Sports Boosters meeting

Date of Request: _____

Requested by: _____

Sports Involved: _____

Amount Requested: _____

Total \$ in Team Account: _____

Please indicate your plans for the \$ in your team account:

Please indicate why you are requesting funding (provide as much detail as possible):

Athletic Director Signature: _____

Check List:

- Estimate Attached
- Evidence of team fundraising
- AD Signature

Boosters Use:

Date Received: _____

Date Considered: _____

Item Approved (circle one): **YES** **NO** **Initials:** _____