



INTERLAKE HIGH SCHOOL BOOSTER CLUB

FUNDING REQUEST FORM

Date: _____ Sport/Activity: _____ Coach: _____

Parent Rep: _____ Phone: _____

ASB Budget Allocation: _____

Explain how your ASB allocation will be spent: _____

If this is a major equipment purchase necessary for participation in your sport, has a request been made from school or district funds before approaching the Booster Club? (Y/N) _____

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	\$ _____
<small>(Once approved, half the amount will come from team account and half from the General Fund)</small>	

FUNDRAISING PLANS:	AMOUNT
_____	_____
_____	_____
TOTAL FUNDRAISING:	\$ _____

FUTURE NEEDS: (list in order of priority)	AMOUNT
_____	_____
_____	_____

All request forms must be completed, signed by the Coach and the Athletic Director and presented to the Board of Directors at least one week prior to their monthly meeting (2nd Monday of each month). The Board will review each funding request for accuracy and completion of the process.

APPROVAL: _____

Coach
Athletic Director

President – IHS Booster Club