



Annual Booster Committee Renewal 26/27

Name of Booster Committee: _____

EHS Coach or Program Sponsor: _____

Officers: (For additional officers, please attach a separate sheet)

Name: _____

Name: _____

Office held: _____

Office held: _____

Email: _____

Email: _____

Phone Number: _____

Phone Number: _____

Name: _____

Name: _____

Office held: _____

Office held: _____

Email: _____

Email: _____

Phone Number: _____

Phone Number: _____

Offices are held from June 1 to May 31st

Goals for upcoming year: _____

Please attach:

- List of all emails, and sites(social media, paid sites,etc) your booster has log in's for as well as passwords for all; this is required for future boosters to retain access to all accounts.
- Minutes of the re-election meeting;
- Most recent meeting minutes if they are not held at the same time.

Member meetings held how often? _____

As officers, we hereby agree to abide by the bylaws of our organization, use the funds raised solely for the benefit of the school and participate in any training given by the Eastmark High School executive board while we strive to improve our children's educational opportunities where support is needed.

Officer Signature

Date

Sponsor/Coach Signature

Date