

REQUEST FOR FUNDS

Name:	Team/Group request is for:
Date:	Date funds/items are needed:
Phone #:	Email:
Amount requested:	
Item(s) requested:	
If funds are for hotel or m	eals, please list the number of students, coaches, rooms, etc:
Website item(s) can be vie	wed/ordered on (if applicable):
Please list fundraising acti	vities you have done as a team to help pay for expenses:
	u would like to tell us about the request:
Please email the complete	l form to stayton boosters@gmail.com or print and turn in to any Booster

Please email the completed form to <u>stayton.boosters@gmail.com</u> or print and turn in to any Booster Club board member prior to the next regularly scheduled meeting. Meetings are held on the third Wednesday of each month at 7:00pm in the SHS library.

Coaches requesting funds (excluding hotel and meal allowances) must attend a Booster Club meeting to present the request and to be available for questions regarding the request. Requests for hotel and meal allowance do not require attending a meeting.

Please feel free to reach out to us if you have any questions.

GO EAGLES!!