



Southeast Raleigh High School Athletic Booster Club

Team Account Funding Request Form

This form must be used to request funding from the Southeast Raleigh High School Athletic Booster Club based on fund available in team accounts. Each request will be reviewed and considered by the Executive Committee. Prior to submission please ensure that 100% of funds are available in your team account. Monthly ledgers are provided at the booster club meeting by the treasurer.

SUBMITTER INFORMATION

Date of Request: _____ Contact Name: _____

Contact Phone/Email: _____

Team: Male Female Both Total # of Athletes: _____

DESCRIPTION OF REQUEST

Description of Request:

FUNDING

Total Amount of Request
\$ _____ . _____

Date Funds are Needed: _____

VENDOR QUOTES

Vendor Name	Item Number	Quantity	Amount	Total

BOOSTER ENGAGEMENT STATEMENT

Describe coaches, athlete and parent contributions to Booster Club activities over the past two years:

NOTE: Requests should be submitted at least 5 business days in advance

Head Coach Signature: _____

BOOSTER CLUB PROCESSING

Athletic Director Acknowledgement: _____ Date: _____

Booster Club Officer Signature: _____ Date: _____

Request Approved: Yes No If Rejected Explanation: _____