

Berthoud High School Athletic Booster Club

Team Funding Request Form

PLEASE PROVIDE 2-3 QUOTES FOR THE ITEMS FOR WHICH FUNDING IS REQUESTED. IF YOU ARE UNABLE TO DO SO, PLEASE EXPLAIN WHY IN THE DESCRIPTION SECTION BELOW.

Sport: _____

Coach: _____

Date (month/year): _____

Amount requested: _____

Description of Need / Reason for Request:

Describe any previous fundraising by your team other than Booster Concessions:

AD comments:

Board Approval Confirmed by:

_____ Date_____