

LAKEVIEW ADULT BOOSTER CLUB REQUEST FORM



The Lakeview Booster Club welcomes your request. There are steps you must follow and information we must have in order for us to consider those requests. Anyone making a request may attend a meeting in person to present their request orally and answer questions, but must leave while a vote is taken -or- they may present their request in writing prior to the start of the monthly meeting.

The following steps are necessary for the request to be considered:

1. Written requests must be received by the first day of the month in order to be considered that month. All late requests will be considered the following month. (The Boosters would appreciate all persons contemplating a request to present them as early in the year and with as much notice and information as possible.)
2. The person or organization submitting a request must furnish the following information:
 - a). Complete description of the supplies/equipment/transportation being requested.
(Color, sizes and materials, place of departure, length of trip and type of transportation)
 - b). Date the request amount is needed by.
 - c). When possible, two bids for supplies, equipment or transportation.

3. Please complete the following:

Person / Teacher / Coach/ Organization making request : _____

Contact Person / Contact phone number and email : _____

Are you requesting FUNDS or MEDALS : please circle one

How many medals requested ? : Students _____ Coaches _____

Medals will say ... WRESTLING STATE QUALIFIER 2018, SPEECH STATE QUALIFIER 2018

Item Requested & Cost of Item Requested: _____

Dollar Amount Requested From Booster Club: _____

Number of Individuals that will benefit from purchased item: _____

Is this a school sponsored activity? _____

If not, explain: _____

Have you sought school funds? _____

Have you sought fundraising or alternative funding? _____

Will other teams/individuals be able to use purchased item ? (Example & please explain) _____

Other information useful in helping the Booster Club to consider funding this request:

Date Requested: _____ Signature of person requesting: _____

Date approved/declined: _____ Reason for Declining: _____