

E.H.S. Athletic Booster Club Request Form

SPORT:	DATE:
TEAM NEED:	
COST ESTIMATE:	
JUSTIFICATION:	

HEAD COACH APPROVAL: YES/ NO
BUDGETED ITEM: YES/ NO
HEAD COACH SIGNATURE

ATHLETIC DIRECTOR APPROVES AS EHS ATHLETIC BUDGET: YES– AD purchases item NO– AD forwards to Booster Club
ATHLETIC DIRECTOR SIGNATURE:

EHS ATHLETIC BOOSTER CLUB APPROVAL: YES– Item is purchased NO– Item is added to long-range planning list
EHS ATHLETIC BOOSTER CLUB BOARD MEMBER SIGNATURE
EHS ATHLETIC BOOSTER CLUB TREASURER SIGNATURE