

# Tamarac Booster Club

## REQUEST FOR FINANCIAL ASSISTANCE

Name of team requesting funds \_\_\_\_\_

Individual requesting the funds \_\_\_\_\_

Amount requested \_\_\_\_\_

Has funding been sought elsewhere \_\_\_\_\_

If so where \_\_\_\_\_

Detailed description of what you are requesting the funding for

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Name of representative that will be attending the Booster Club meeting  
to make the request \_\_\_\_\_

Date money is needed \_\_\_\_\_

Who should the check be made out to \_\_\_\_\_

Athletic Director's Signature \_\_\_\_\_