

Deerfield Athletic Booster Club

Budget Requisition Form

(Use this form to request funds)

Date: _____ Total Requested Amount: _____

Requesting Sport: _____

Signature of Varsity Coach: _____

AD Signature: _____

Description of project / item / event:

Please note any other information that would be helpful in making our decision:
(For example: Storage of equipment)

Date Funds are needed by: _____

Number of students that will benefit: _____

How will students benefit: _____

Please provide details regarding fundraising efforts:

Description of items to be purchased as well as vendor contact information:

Booster Club Use Only

Date received by Treasurer: _____

Approved: _____ Denied: _____ Modified: _____
(Receipt / Bill is required)

School District and Booster Club Response: _____

Signature of Treasurer: _____

Signature of Club President: _____