

TRUCKEE HIGH SCHOOL BOOSTER CLUB BOOSTER BUCKS REQUEST



Date of request: _____

Team/Club Name: _____

Coach/Advisor: _____

Phone: _____ Email: _____

Number of participants: _____

Club /Team Parent or Captains: _____

Phone: _____ Email: _____

<u>Key budget items listed by priority</u>	<u>Projected Costs</u>	<u>Estimated Timing of Expense</u>
1. _____	\$ _____	_____
2. _____	\$ _____	_____
3. _____	\$ _____	_____
4. _____	\$ _____	_____
Total Budget	\$ _____	
Estimated team/club fundraising total	\$ _____	
Amount requested from Boosters	\$ _____	

Booster Meetings Parents, Students, Advisors or Coaches Attended this school year:

Volunteer Activities/Hours during this school year: _____

The Booster Club requires each club or team to volunteer time to the Boosters in order to be eligible for funding. Parents and/or students should attend regular monthly Booster meetings, particularly during their season.

Preferred seasons to volunteers: FALL WINTER SPRING SUMMER

Return completed form no later than November 1, March 1, or June 1 to:

- Booster mailbox at Truckee High School OR
- Email to: truckeeboosters@gmail.com