

# Conner Athletic Boosters

## Funds Request Form

This form shall be completed by a representative of the sport requesting funds and signed by both the Parent Representative and the Head Coach. The form must be completed in its entirety and delivered to:

Conner Athletic Boosters Attn: Treasurer, 3310 Cougar Path Hebron, KY 41048  
or scanned and emailed to [info@connerboosters.com](mailto:info@connerboosters.com)

<b>Section 1: Athletics Program Information</b>	
<b>Sport Requesting Funds:</b>	
<b>Parent Representative Name:</b>	
<b>Head Coach Name:</b>	
<b>Amount of Request:</b>	
<b>Three estimates for desired purchase and company name</b>	
1.	
2.	
3.	

<b>Section 2: Purpose or Use of the Requested Funds</b>	
Explain for what purpose the funds will be used in the space provided	

<b>Section 3: Certificate of Request</b>	
<b>Signature of Parent Rep / Date:</b>	
<b>Signature of Head Coach / Date</b>	

<b>Section 4: Internal Use Only</b>	
<b>Cumulative Amount of Funds Distributed to Sport to Date:</b>	
<b>Sport Representation at Fundraisers:</b>	
<b>Funds Request Approved / Not Approved:</b>	