

Allocation Request Form

Please complete all relevant sections below and return this form to the HHS Boosters. The form may be submitted in hard copy to the Boosters mail box in the HHS front office or electronically to hammondboosters@gmail.com.

Organization Requesting Allocation

Name of Team/Club/Group:	
Brief description of request:	
Amount requested:	\$

Coach or Sponsor

Name	Position/Title	Phone	Email

Parent/Other Representative

Name	Phone	Email

Allocation Details

Reason for request:	
Other funding sources:	
Additional comments:	

Support for Boosters

How does your group contribute to HHS Boosters efforts throughout the year?

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AAM Approval

Requests by Athletic Teams & Activities Groups MUST be Approved by Mike Lerner

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Please contact Kris Woodson with questions or comments at hammondboosters@gmail.com