**SENIOR NIGHT FUND REQEST FORM**

\*\*All fund requests are reviewed by the WHS Boosters and Director of Student Activities\*\*

**Please submit** to Sonia Rosen, Treasurer, WHS Boosters @ whsboosters123@gmail.com

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Team Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name & Email of Coach: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount of Request: \_\_$100\_\_\_\_\_\_\_\_\_\_\_\_\_

When funds are needed by: \_\_\_\_\_\_ASAP\_\_\_\_\_\_\_\_

Make Payable to:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please let us know how you plan to use the money in support of Senior Night:

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| **For WHS Booster Only:**Approved\_\_\_\_\_ Denied \_\_\_\_\_\_\_ Check Amount \_\_\_\_\_\_\_\_\_\_\_ Paid to:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |