



OHS SPORTS BOOSTERS CLUB COACH REQUEST FORM

COACH(ES) NAME / SPORT:

CONTACT INFO:

REQUEST:

PURPOSE: (include number of athletes served and how long the equipment is expected to last.)

ATHLETIC DIRECTOR'S SIGNATURE / DATE:_____

Instructions:

Please gather more than one bid, when possible, and include tax and shipping information as well. In order to get your coach request on our agenda, inform the Athletic Director that you are planning to attend a meeting in person and get his/her signature on this form. Bring this form and a minimum of 3 copies of your bid(s) with you to our meeting. Meetings are held on the 1st Monday of each month in room K-1. The 3 copies are for the president, treasurer and secretary's records.

PLEASE NOTE: *Regarding championship ring requests, the Sports Boosters Club has set a contribution limit of \$100 per athlete.*

BOOSTER CLUB USE ONLY BELOW THIS LINE

Amount Approved:_____

Amount Denied:_____

Board Member Signature(s)_____ Date:_____

_____ Date:_____

Notes: