



# Avon Athletic Booster Request Form



Date of Request:

Sport:

Coach Name:

Description of Request:

Quantity:

Reason for Request:

Quote:

Total Cost:

Amount requested from Avon Athletic Boosters:

Date Needed by:

\*\*\* Any requests must be submitted 2 weeks prior to an Avon Athletic Booster Meeting in order to be brought up before the group.

Avon Athletic Director:	Approval		Denial	
Avon Athletic Board	Approval		Denial	



For Avon Athletic Booster Use Only:

Check Number Issued: