



Request to fund club, sports team, or item at Ferndale High School by Ferndale Golden Eagles Booster Club

Requested by: _____ Date of Request: _____

Request description:

Amount of Request: _____

Is this item to be used by: Club Sports Team Group Other

If Other, please specify:

Will the funding provide equitable disbursement for both boys and girls?

Yes No If No please explain:

Who will be making the purchase? FGEBC Directly ASB Reimbursement

Please provide vendor information for FGEBC direct purchase in link or vendor contact in body of email.

Approved by: _____

(your signature attests that you “the requestor” has provided true and accurate information)

Print name: _____

Please print this form, sign and scan and e-mail to fgebcfhs@gmail.com. No funding will be provided without this form.

Booster Club Use Only Below

Does the above request comply with Title IX? Yes No

Was the completed form made available to the FGEBC Board for approval Yes No

Was an in person or online presentation performed with the request? Yes No

Date of Board Approval _____

FGEBC Board Member Signature _____