



QOHS All-School Booster Club Grant Request

Date: _____

Name of Organization Requesting Funding: _____

Sponsor/Coach Name: _____

Sponsor/Coach Contact Information: _____

Dollar Amount Requested: _____

Purpose for Requested Funding:

Person Presenting Request at Booster Club Meeting and Contact Information:

In return for funding approval, we agree to provide volunteers for concessions and assist with the annual Mulch Drive. Please provide the main point of contact for providing these services and their contact information.

Please Note: Athletic teams must seek the approval of the QOHS Athletic Director and Clubs/Organizations must seek the approval of the QOHS principal prior to submitting request to the Booster Club. Please have the appropriate approval person sign and date on the line below:

Signature: _____ Date: _____

Return completed form to: Janet Korol at the QOHS Booster Club Mailbox. Questions can be emailed to her at KorolBoosterPrez@comcast.net or 301-922-0251. The Booster Club Executive Secretary will contact the person who presented the request at the Booster Club Meeting with our decision within 24 hours.

Booster Club Response: Funding: denied approved
If denied, reason: _____
Other comments: _____