

Kenowa Hills Athletic Boosters Request Form

Sport Requesting Item	1:			
Coach:		Date:		
Request:				
Items:		0		m - 1
Item		Quantity	Individual Cost	Total
	_			
_			Total	
To be completed by th	e Kenowa Hills Spo	ort Boosters:		
	о ор			
Approved By:				
President	Date	Treasure		Date
Make a Copy for:				

- Athletic Director
 - Treasurer
 - Original stays with President