

Deposit to AGHS Sports Boosters

TEAM/CLUB INFORMATION

TEAM/CLUB: _____ COACH/ADVISOR: _____

TEAM/CLUB COORDINATOR: _____ PHONE NUMBER: (____) _____ - _____

EVENT/FUNDRAISER INFORMATION

EVENT TITLE: _____ IS THIS A FUNDRAISER? YES NO

DATE OF EVENT: _____

ALL FUNDRAISING EVENTS MUST BE PRE-APPROVED IN ORDER FOR FUNDS TO BE DEPOSITED INTO A TEAM/CLUB ACCOUNT

DEPOSIT

	QUANTITY	AMOUNT
\$50's		\$
\$20's		\$
\$10's		\$
\$5's		\$
\$1's		\$
OTHER		\$
	TOTAL CASH	\$

CHECK #	AMOUNT
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL CHECKS PG 1	\$
TOTAL CHECKS PG 2	\$
TOTAL CHECKS ALL	\$

TOTAL CASH	\$
TOTAL CHECKS	\$
TOTAL DEPOSIT	\$

Is this the final deposit for
this event?

YES NO

DEPOSIT TALLIED & SUBMITTED BY:

1ST COUNTER'S NAME (PLEASE PRINT)

CONTACT EMAIL AND PHONE #

VERIFIER'S NAME (PLEASE PRINT)

CONTACT EMAIL AND PHONE #

DEPOSIT VERIFIED BY:

NAME (SPORTS BOOSTERS TREASURER)

Version: Sept 2016

