



**Hanover School Booster/PTO Club
Funds Request Form**

Date Applied For: _____

Name of Organization: _____

Date of Event: _____

Title of Event: _____

Date Funds/Items Needed: _____

Items or Amount of Funds Requested: _____

Explanation of What the Funds Will Be Used For: _____

Number of Students Funds/Items will Benefit: _____

Applicant Signature

Board Action Only:

___ Approved

___ Not Approved

Date: _____

Amount/Items Approved: _____

Board Member Signature

Return form to Booster Club Tray at school office or Ellen Pralle, Public Relations Officer at ellenpralle@hotmail.com or 785.337.2637.