

Sport Club Budget Request

Sport Club: _____ Semester: _____

Contact Name: _____ Contact E-mail: _____

*Please only list items in this budget that you would like to be paid using Departmental Funds. If you do not know the exact cost of an item, make an educated estimate.

Playing Equipment

Item	Description	Count	Vendor	Item Cost	Total Cost
Total				\$	

League Dues

League Name	Contact Name	Contact Address	Contact Phone	Total Amount
				\$

Tournament Entrance Fees

Tournament	Contact Name	Contact Address	Contact Phone	Date of Event	Entrance Fee
Total					\$



Sport Club Budget Request

Official's Fees

Event Description	Event Date	Number of Officials	Cost per Official	Total Cost
Total				\$

Club Uniforms

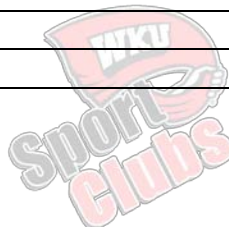
Item	Description	Count	Vendor	Item Cost	Total Cost
Total					\$

Facility Rental

Facility	Reason	Rental Date(s)	Cost per Rental	Total Cost
Total				\$

Van/Car Rental

Reason for Rental	Rental Date(s)	Cost of Rental
Total		\$



Sport Club Budget Request

Hotel Accommodations

Reservation Date	Reason for Reservation	Cost per Night	Total Cost
Total			\$

Total Requested Budget Amount

Playing Equipment: \$ _____
 League Dues: \$ _____
 Tournament Entrance Fees: \$ _____
 Official's Fees: \$ _____
 Club Uniforms: \$ _____
 Facility Rentals: \$ _____
 Van/Car Rental: \$ _____
 Hotel Accommodations: \$ _____
TOTAL: \$ _____

Comments:

Office Use Only

Date Received: _____

Received By: _____

Comments: _____

