

BECKER YOUTH SPORTS ASSOCIATION, INC.

Request for Donation from Gambling Funds

Your Name / Organization: _____

Are you / your organization currently part of BYSA: Yes or No

If yes, have you requested the funds from that sport's general fund?: Yes or No \$ _____

If yes, did they contribute to the cost and how much: Yes or No \$ _____

Describe the item to be purchased or project for which funds are requested: _____

Total Cost of the project / purchase: _____

(Please provide vendor invoice or estimate if available)

How much will you/your organization be contributing to the project / purchase?: _____

What have you/your organization done to raise funds for this project / purchase?: _____

Please Note:

If your request is \$500.00 or more you, or another representative from your organization, must attend a regularly scheduled BYSA meeting to present this request form. Please contact Tim Buchholz at 763-262-2647 or another BYSA board member from information on the next scheduled meeting date and time.

BYSA Use Only:

Request is: Approved Denied

Notes: