BOOSTER CLUB BUDGET FORM

School _____ Year _____

Booster Club _____ Sport/Gender _____

INCOME	Proposed	Actual
Gate Receipts		
Entry Fees		
Camps		
Dues		
Donations		
Sponsorships		
Concessions		
Program/Ad Sales		
Fundraisers		
Other		
TOTAL INCOME		

EXPENSES	Proposed	Actual
Coaching Compensation (additional stipends and SSO extra pay)		
Purchased Services (athletic insurance, cell phones, entry fees, officials)		
Transportation (bus allotment, charter buses, leased vehicles, rental cars)		
Travel (food, pre-game food, hotel, laundry)		
Equipment and Supplies (practice/game equipment, practice/game supplies)		
Uniforms (game uniforms, t-shirts, warm-ups)		
Facility and Equipment Rental (venue, equipment)		
Publicity		
Medical & Training Facilities & Services (medical supplies, trainer contract, training equipment)		
Other (awards, banquet, clinic fees, field maintenance, hospitality, region/state dues)		
Sub-Total		
Capital Expenditures		
TOTAL EXPENSES		

Head Coach _____ Date _____

Booster Club Representative _____ Date _____

Principal/Designee _____ Date _____

Date Approved Proposed Budget _____

Date Approved Annual Budget Report _____