



FHS Music Boosters



Check / Transfer Request

STUDENT _____

REASON / EVENT _____

DATE _____

AMOUNT _____

Check Request

Mail Check

Give to student

Payable to _____

Mail To _____

Transfer to another student's account

Transfer To: _____

Transfer towards planned trip

Student Signature _____

Parent Signature _____

Director Approval _____

(FHS Music Booster Use Only - Do Not Write Below This Line)

Notes

Check Number

Dated

Amount

Written by (initials)
