Are you currently a member of the Huntington Booster Club?  □ Yes  □ No
Have you attended any Booster Club fundraising events?  □ Yes  □ No

Grant Information:
The purpose of the Grant is to fund, support and foster team, sport, school or district-wide initiatives that have a broad impact on the encouragement of the participation in healthy physical activities and athletics by our students and the promotion and advancement of the competitiveness of our athletic programs and teams. Grants will generally not be approved for items that the district currently underwrites e.g., uniforms, etc.

Grant applications invite teachers, coaches and administrators to apply for funds for such initiatives. An applicant who wishes to obtain funding should complete a grant application which can be found online at huntingtonboosterclub.com or at HUFSD under Booster Club. After gaining approval from the district Athletic Director, please send it to Huntington Booster Club, P.O. Box 2294, Huntington, New York 11743 or drop in Booster Club box in athletic office.

*For additional information contact Susan Gerbavsits: keso1114@aol.com or Tim Pillion: tim.pillion@gmail.com

Applicant Information:
Name of Applicant __________________________________________ Date _______________________
School/Athletic Team ___________________________________________________________________
Telephone ______________________________ Email _____________________________________

OFFICERS
Tim Pillion, President • Denise Stieve, Marketing/Advertising • Julie LaBella, Special Events/Dinner • Joe Mattio, Field House/Technology
Susan Gerbavsits, Grants • Michele Deegan, Membership • Jodi Biernacki, Secretary • Denise Goldsmith/Tiffany Annunziata, Treasurer
Kelly Paci/Meredith Hassett, Merchandise • Lauren Meagher, Finley Merchandise

MEMBERS
Tim Madden, Summer Camp Director
Bari Fehrs, Betsy Giamo, Maris Jamison, Erik Krisch, Patti Weber

INTERNS
Ashley Wright, Grace Curran

Huntington Booster Club, Inc., a 501c Corporation • Tax ID 30-0402170
HUNTINGTON BOOSTER CLUB, INC. • P.O. BOX 2294 • HUNTINGTON, NEW YORK 11743 • WWW.HUNTINGTONBOOSTERCLUB.COM
Summary of Request: Write a brief overview of the project – please attach information on requested item(s) including pictures, product information or anything else you think we may find helpful.

______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

Please answer questions as completely as possible.

1. How will this grant support the advancement and competitiveness of our athletic programs and teams?
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

2. What will students be able to accomplish as a result of this grant that will expand and enhance athletic performance?
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

3. Please share anything else that might be valuable in helping the committee make its decision.
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

4. What other funding sources, if any, have you investigated to support this project?
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

Budget Information:

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Supervisor's Certification (required):
I am aware of this grant application.

Athletic Director: ____________________________________________________________

Signature: ___________________________ Date: ______________________