

# OSSINING ATHLETIC BOOSTER CLUB

## Funding Application

**Ossining Athletic Booster Club Mission:** Ossining Athletic Booster Club (OABC) is a non-profit volunteer organization comprised of parents, students, and other community members who have an interest in enhancing the athletic programs of the Ossining School District. OABC operates to assist the athletic department and our student athletes by promoting a positive atmosphere. The Ossining Athletic Booster Club also provides moral and financial support needed for a successful athletic program.

### Application Eligibility:

- Funding requests may be made by the Ossining School District Athletic Department or its school teams.
- A coach or team liaison requesting funds must be a current member of OABC.

### Submitting a request:

- Send this form and any attached documentation to Marcelo Ippoliti at [mippoliti25@gmail.com](mailto:mippoliti25@gmail.com) or by mail to Ossining Athletic Booster Club, P.O. Box 1, Ossining, NY 10562.
- Upon purchase, provide receipts or other documentation for accounting purposes.
- If you have questions, please contact Marcelo at 914-906-5867.

### OABC will not fund:

- Personal items that will not be returned to the Athletic Department at the end of a season, except that OABC will consider cases of hardship.

**Applicant Name(s)** \_\_\_\_\_

**Sport** \_\_\_\_\_ **Level** (Varsity, JV, Modified) \_\_\_\_\_

**Phone number** \_\_\_\_\_

**Email address** \_\_\_\_\_

**Amount requested** \_\_\_\_\_

**Date funding is needed** \_\_\_\_\_

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**Equipment:** list items to be purchased, quantities, total cost and vendor (include vendor website and item number, if applicable). Equipment is defined as: Uniforms, athletic and other equipment that will enhance the team's performance.

Item(s)	Purpose	Quantity	Total Cost

**Services:** list name of outside service provider; explain role or purpose; list total hours, indicate rate. Attach background information for service provider.

Name of person/ service	Role/purpose	Hours	Rate	Total Cost

**Other:** Please be specific.

Name of team/person	Description of purchase	Cost