

FHS BOOSTER ACCOUNT REGISTRATION FORM and signature verification form

This form is good for the current Academic School Year

Name of this Account (usually the group name)	Today's Date	Current Academic School Year.
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Group Sponsor Name: (Coach, Teacher, Staff Member)	Phone Number/Extension:
Signature	

Primary Contact Name:		
Hm Address	City	Zip
Hm Phone	Cell	
Email Address:	Signature:	

Secondary Contact Name:		
Hm Address	City	Zip
Hm Phone	Cell	
Email Address:	Signature:	

The above name persons are authorized to withdraw funds from this account; any additional names enter below.

Name 1:	Address
Hm Phone	Cell
Email Address:	Signature
Name 1:	Address
Hm Phone	Cell
Email Address:	Signature
Name 1:	Address
Hm Phone	Cell
Email Address:	Signature

WHAT IS THE PURPOSE OF THIS ACCOUNT?

This form is required to be resubmitted each academic school year or when personnel changes to the above names.

BELOW IS FOR BOOSTER TREASURER ONLY

Date Account Setup:	
Initial Deposit (must be accompanied by deposit form)	Date Set to Primary Contact Account is setup

Send completed form to: FHS Booster Club; 6400 Whitelock Parkway; Elk Grove, CA 95757 -- or deposit in the Booster mail box in the main administration building