



BEST BUDDIES FUNDING REQUEST FORM

Note: This form must be submitted to Best Buddies Head Office 15 days before your event.

School Name: _____ Contact: _____

Email: _____ Phone Number: _____

Type of Funding Request:

Funds for 1st group event

Funds for 2nd group event

Reimbursement (attach receipts)

Cheque Information:

Cheque Payable to School Name: _____ c/o: _____

OR Teacher Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Please provide the following information:

Number of people in your chapter: _____ Number of attendees at the event: _____

Date of the activity: _____ Location of event: _____

Describe the activity: _____

Total cost of event (include admission, food, travel and any other expenses): _____

Donations/Funds Raised: _____ Total Requested Funds: _____

HST Amount (if applicable) on Receipt (reimbursements only): _____

Submit all receipts to Head Office. Include a copy of the original sale receipt, not the debit or credit receipt.

For Best Buddies Head Office Use Only:

Roster Submitted

Approved by: _____

of students on roster: _____

Cheque Sent Date: _____

Chapter Code: _____

Cheque Number : _____

Chapter Account OR Best Buddies Account

Bank Account Updated Date: _____