

Homestead Athletic Boosters

Membership Application 2020-2021



Parent Name(s): _____
as you want your name to appear in the program

Student(s) Name & Grade: _____

Address: _____

Phone: _____

Email Address: _____

Sport(s): _____

Circle your choice:

<u>Level</u>	<u>“Thank You” Gift</u>
\$1,000 - Chairman’s Club	– Stadium Chair, Blanket & Rain Poncho
\$500 - Champion’s Club	– HHS Premium Stadium Chair
\$250 - Gold Club	– HHS Stadium Blanket <u>or</u> Rain Poncho
\$100 - Blue Club	– HHS Umbrella <u>or</u> Tervis Tumbler
\$50 - Spartan Club	– HHS Lanyard <u>or</u> Stadium Cushion

NOTE: Gifts subject to change based on available inventory.

Volunteer Opportunities (check if interested in helping):

Board Member _____ Other _____

Committee Member _____

Return this Membership form and check to the address noted below:

Homestead Athletic Booster Club
ATTN: Membership
4310 Homestead Road
Fort Wayne, IN 46814

Questions? Email – kentpyle.hhs@gmail.com