

**Ashton-Franklin Center
Parent Teacher Club**

Cora Wujek, President ~ Kristy Murphy, Vice President

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Kelly Henert, Secretary ~ Lisa Jahn, Treasurer

AFC PTC REQUEST FORM

Requests must be received by the 4th Tuesday of the month in order to be reviewed during monthly meeting.
Please return completed form to a PTC Officer, District #275 Principal, or by mailing directly to the PTC.

Date: ____ / ____ / ____

Contact Person/Group making Request: _____

Phone Number: _____ Email Address: _____

Item(s)/Activity/Funds being requested and why: _____

Request requires a deposit: Yes No If yes, Amount \$ _____ Needed by: ____ / ____ / ____

Make deposit check payable to: _____

**Proceed only if request being made is for field trip assistance.*

Field Trip is: Mandatory Optional # of Students Requesting Assistance for: _____

Event Date: ____ / ____ / ____ Total Amount Requested: \$ _____

List all additional field trips taken by requesting group/student during current school year: _____

PTC Officer Use Only

Review Date: ____ / ____ / ____ Request: Approved Denied Additional Information Needed

Comments: _____

Amount Given: \$ _____ Check # _____

PTC Officer Signature _____