

# GAYMAN HOME AND SCHOOL ASSOCIATION PAYMENT REQUEST FORM



<b>Requestor:</b>	<b>Date:</b>
<b>Check Payable To:</b>	
<b>Address:</b>	

If check can be sent home with your child, please list child's name, grade, and teacher below:

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Event/Committee	Amount
Art	
Assembly	
Bingo	
Book Fair	
Fall Fair	
Field Trips	
Gayman Dance	
Gayman Loves the Earth	
Gayman Players	
Kids Care Club	
Library/Technology	
Picnic	
Principals Fund	
Printing	
Color Run	
Reading Olympics	
School Improvements	
6 <sup>th</sup> Grade Club	
6 <sup>th</sup> Grade Promotion	
Teacher Appreciation Week	
Teachers' Fund	
Teacher Luncheons	
Yearbook	
Miscellaneous	
<b>TOTAL AMOUNT</b>	

Description/Special Instructions:

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**\*\*If Tax Exempt EIN# was used, please make note above\*\***

**GHSA President Signature for Approval:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Form can be emailed to [GHSAinquiries@gmail.com](mailto:GHSAinquiries@gmail.com)*