



Stephen F. Austin State University
Sport Club Program
Deposit Form

Please provide the information requested below and attach the deposit receipt to the bottom of the page.

Sport Club: _____

Date of Deposit: _____

Name: _____

Amount Deposited: _____

Position: _____

Phone Number: _____

Reason for Deposit: _____

Date Submitted: _____

This form is due no later than three (3) business days after the deposit has been made. Please bring in the original receipt given to you at the time of the deposit for verification.

Financial Officer (President, Treasurer, VP, etc.)

Coordinator - Sport Clubs

_____	Y or N	_____
Points Awarded	Updated	Initials

Please
attach
receipt
here