

NEW BERLIN C.U.S.D. #16

Application for Establishing a Student Activity Account

ACCOUNT NAME: Class of 2027

ACCOUNT NUMBER: _____ (To be assigned by Fund Custodian)

FACULTY ADVISOR: Joe Viola [Signature]
NAME SIGNATURE

Taylor Julian [Signature]
NAME SIGNATURE

TREASURER: _____
NAME SIGNATURE

PRINCIPAL APPROVED: [Signature] 9/13/23
SIGNATURE DATE

BOARD APPROVED: _____
DATE