Date: _____





OCCASIONAL MEAL REQUEST FORM (2017-2018)

Office of Athletics Compliance:

All Occasional Meals must be approved by the Compliance Office prior to the meal taking place.

Sport:	Meal Host: Date of Meal:			
Location of Meal:				
Relationship of Meal Host to Sport:	□ Coach	☐ Parent	☐ Booster	
 within the locale of Boise State Uni Boosters may only provide an occar facility. Parents may provide an occasional: Local transportation may be provide "Occasional" is defined as one time During an official visit, a prospect 	versity. asional meal to meal to a stude ed to the studer per month (no may attend an	a student-athle ent-athlete; or to nt-athletes to att of per staff mem a occasional me	e or full team with an occasional meal at the or full team at the booster's home of the team at their home or on-campus fattend the occasional meal. The or booster or 12 times per calendar teal, provided the meal does not occur a tean as one of the three permissible meals.	r on-campus acility. year t a booster's
	Attending the	Meal (Attach I	Roster if Necessary)	
NAME Example: Bob & Carol Smith		Parents	RELATIONSHIP	
By signing below, I certify that I have re	ad the informat	tion above, that	t it is accurate, and that I will abide by the	ne rules.
Host Signature:			Date:	
Head Coach's Signature:			Date:	
The Occasional Meal has been:	☐ Approved	□ D	Penied	