

SECTION VII OFFICIAL'S VOUCHER

Name: _____ Mailing Address: _____

Date _____

Personal ID Number: _____

School District Residency: _____

Sport: _____ Phone: _____

Gender: BOYS or GIRLS

Schools involved in contest: _____ VS _____

Site: _____ District of site: _____ Tier: _____

Varsity Fee \$ _____

Junior Varsity Fee \$ _____

Modified Fee \$ _____

Additional Sectional Fee Fee \$ _____

Other: _____ Fee \$ _____

Total \$ _____

Special Circumstances (worked alone etc.): _____

I have completed & received fingerprinting clearance from NYSED and am eligible to officiate this contest.

Signature of Official Date

Athletic Director/Site Supervisor Date

Treasurer Date