



NORTH SHORE GIRLS SOCCER CLUB REFEREE PAYMENT ADVANCES FORM

TEAM NAME

AGE GROUP

MANAGER	_____
ADDRESS	_____
PHONE	_____
E-MAIL	_____

ORIGINAL ADVANCE PROVIDED BY NSGSC

Date Amount

GAME DETAILS

	<u>Date</u>	<u>Opponent</u>	<u>Field</u>	<u>Referee</u>	<u>Paid</u>
1	_____	_____	_____	_____	\$ _____
2	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____
6	_____	_____	_____	_____	_____
7	_____	_____	_____	_____	_____
8	_____	_____	_____	_____	_____
9	_____	_____	_____	_____	_____
10	_____	_____	_____	_____	_____
11	_____	_____	_____	_____	_____
12	_____	_____	_____	_____	_____
Total Amount Paid					\$ <input type="text"/>

Note: Please fill in all home games along with the amount paid to the referee each game. When the season is over, please send this completed form as follows:

**North Shore Girls Soccer Club
PO Box 37031
2930 Lonsdale Avenue
North Vancouver, BC V7N 4M4**

If the amount paid is less than the original advance, please enclose payment for the difference. If it is more than the original, NSGSC will reimburse you the difference.