

2004 PYSA Referee Receipt

Referee Name: \_\_\_\_\_

Game Date: \_\_\_\_\_

Game #: \_\_\_\_\_

Game Div: \_\_\_\_\_

Did you substitute for another ref for this game? Yes/No If yes, for whom? \_\_\_\_\_

If Middle or Senior Division, did you referee alone? Yes/No

If yes, need coaches initials. \_\_\_\_\_ \* Very important – you will not be paid the combined rate unless the coaches initial.

Coaches Signatures:

\_\_\_\_\_

Mail to: Meg Duckett, 470 Sandy Point Ave., Portsmouth, RI 02871

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