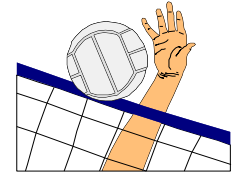


**Byron-Bergen Central School District**  
**Volleyball Voucher**  
**2017-2018**



Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 (Please Print)

Address: \_\_\_\_\_  
 Number Street City Zip code

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (Must be filled in, at least the first time to each district, to be processed)

Are You Employed by this district in any other capacity? Yes \_\_\_\_\_; No \_\_\_\_\_

Assignment: **Volleyball Official**

Contest Date: \_\_\_\_\_

Opponent: \_\_\_\_\_ Starting Time: \_\_\_\_\_ Place: \_\_\_\_\_

Level:	Varsity	JV	Modified	Boys	Girls
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Check one (1):**

- JV/Varsity combo: \$133.00  
(Var. [3 of 5]; JV [3 of 3])
- Varsity match only (3 of 5): \$84.00
- JV match only (3 of 3): \$59.10
- Modified (5 of 5): \$62.83
- Modified (6 of 6): \$75.40

The **tournament** rate is: 2 of 3 and 3 of 3 tournament play - \$17/game Varsity and \$12/game JV.

Number of tournament games: \_\_\_\_\_ at \$17.00; \_\_\_\_\_ at \$12.00 = \_\_\_\_\_

Fee requested = \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*Officials please note:** By officiating this contest, and signing this voucher, you are indicating that you have been properly finger printed and background checked and that you have been found employable by NYSED standards in NYS Public Schools.

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Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
 Director of Athletics

Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
 District Office