



**East Irondequoit Central School District**  
**Athletic Department**

**Wrestling Official Voucher**  
**2023-2024**

**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:** Wrestling Official

**Event:**

**Sport:** Varsity, JV/Frosh or Modified Wrestling (circle one) **Contest Date:** \_\_\_\_\_

**Opponent(s):** \_\_\_\_\_

**Starting Time:** \_\_\_\_\_ **Meet site:** \_\_\_\_\_

Extra Varsity bouts:	\$9.30
Extra JV/Frosh bouts:	\$7.45
Extra Modified bouts:	\$6.50
*Tournament fee same as extra bouts -1/13 <sup>th</sup> of dual	

**Varsity Meet Fee:** = \$121.00

**JV/Frosh Meet Fee:** = \$ 96.80

**Modified Meet Fee:** = \$ 84.70

**Extra bouts, if any:** \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

**Total 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.

**Approved:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Coach

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