



# BRAMPTON YOUTH SOCCER CLUB

## Assistant Referees Claim Form



**\*\*\*ALL FIELDS MUST BE FILLED OUT IN ITS ENTIRETY OR CLAIM WILL NOT BE PROCESSED!\*\*\***

Name:		S I N:	
Address:		O S A #:	
City:			
Postal Code:		Telephone:	
email:			

### OUTDOOR SEASON

# of Games

Assistant Referee		LINES AT \$25 =	
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Game Date	Home		Away
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TOTAL CLAIM

REFEREE SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

VERIFIED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

Forms are to be **SUBMITTED ONLY ONCE PER MONTH** for payment at the BYSC Office at...  
 8950 McLaughlin Rd South Bldg D., Brampton, ON L6Y 5T1  
 OFFICE HOURS: Monday - Thursda 4:00pm - 8:00pm and Saturday 9:00am - 1:00pm

Cheque #		Cheque Date:	
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