Vaca Valley Figure Skating Club
Skater's Fund Check Request Form

Member's Name: _____

Date Submitted: _____

You must have a receipt for all expenditures. Checks will only be issued to the benefiting skater.

This form must be completed in ink or typewritten.

Check one: 1. Mail Check _____ to the following address: _____

2. Hold check for pick up _____ Please provide contact phone number: _____

Receipt Date	Vendor and brief description of skating purpose	Amount
	Total Amount Requested	

Official Use Only

Check #	Date Pd.

I certify that the above expenses were incurred for skating related expenses and have not been submitted previously.

Skater's Signature: _____ Date: _____

If skater is under 18 years old then parent/guardian must sign.

Parent's Signature: _____ Date: _____

Approved by:	Date: