

Ballarat & District Soccer Association

Referee Claim Form

Name: _____ Date: _____

Match Fees						
Date	Venue	Grade	Position	Team 1	Team 2	Fee
						\$
						\$
						\$
						\$
						\$
						\$
						\$
						\$
						\$
Total						\$
Travel Allowance						
Date	Venue					Fee
						\$
						\$
						\$
						\$
						\$
						\$
Total						\$
Grand Total						\$

Signed: _____

Payment amounts are on the current season's Referee Payments Schedule, which can be downloaded from the web site under Section 9 of the Handbook.

Please e-mail all claims to Treasurer, BDSA bdsa-treasurer@hotmail.com