

# RECORD SHEET

## SURF SPORTS SWIM SUBSIDY

PLEASE MAKE SURE YOU DO YOUR 16 SWIMS AND HAVE YOUR COACH SIGN OFF. YOU **MUST ATTACH YOUR TAX INVOICE**

*Make sure your tax invoice dates reflect the dates on this record sheet.*

**NAME:** \_\_\_\_\_

Visit	Day	Date	Time
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			

**PLEASE MAKE SURE YOU HAND YOUR SUBSIDY IN EVERY MONTH**

**Coach Signature:** \_\_\_\_\_ **Date:** \_\_\_/\_\_\_/\_\_\_\_\_

### Bank Account Details

Bank : \_\_\_\_\_ Account Holders Name: \_\_\_\_\_

BSB: \_\_\_\_\_ A/C No.: \_\_\_\_\_

Email: \_\_\_\_\_

Office use only Accepted/Rejected

Rostered Patrol Hours Attended: \_\_\_\_\_

Deficit: \_\_\_\_\_

Squad Sessions \_\_\_\_\_

Carnival Attendance: \_\_\_\_\_

Approved: Yes/No

Amount Paid: \$ \_\_\_\_\_ Signature: \_\_\_\_\_ Date of payment: \_\_\_/\_\_\_/\_\_\_\_\_

Sign: \_\_\_\_\_ Date: / /

Please pay \$

Alan Rogers Signature

Date: / / 2023