



Girls Gymnsatics - Extra Compensation Form

OFFICIALS NAME _____ DATE _____

HOME SCHOOL: _____ # Exh: _____

VISITING SCHOOL: _____ # Exh: _____

Total #: _____ @ \$4.00 each = _____

COACH SIGNATURE _____ SCHOOL _____

Email to BOTH within three (3) business days:

Grace Chianese, gchianese@nasboces.org

Regina VanBlenis, rvanblenis@nasboces.org

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