



# Webster Lacrosse Club

Tournament Funds Submission Form

Tournament: \_\_\_\_\_

Team & Age Group: \_\_\_\_\_

Coach/Manager: \_\_\_\_\_

	NAME	Method of Payment & Amount Paid		DATE RECEIVED
		CASH	CHECK	
1				
2				
3				
4				
5				
6				
7				
8				
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11				
12				
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21				
22				
23				
24				
25				
26				
27				
28				
<b>Total</b>		<b>\$0</b>	<b>\$0</b>	

Total amount to be deposited: \_\_\_\_\_ **\$0**

Date of Deposit \_\_\_/\_\_\_/\_\_\_