

DATE OF CONTEST: \_\_\_\_\_ SPORT:  FB  VB  SCR  XC/TR  BSB  SB  SWM  WR

SITE/LOCATION: \_\_\_\_\_ LIST how many games played:  VARSITY: \_\_\_\_  JV: \_\_\_\_

\_\_\_\_\_  
 LAST NAME FIRST NAME M.I. VENDOR NUMBER

\_\_\_\_\_  
 STREET ADDRESS CITY ZIP CODE

\_\_\_\_\_  
 HOME PHONE #: WORK PHONE #: CELL PHONE #:

GAME	LIST ALL PARTNERS' NAMES	LEVEL	GAME COMPLETED			HOME TEAM	VISITING TEAM	GAME RATE
			YES	NO	NOT PLAYED			
# 1								
# 2								
# 3								
# 4								

OFFICE USE ONLY

\_\_\_\_\_  
 HOME COACH PRINT & SIGNATURE OFFICIAL'S SIGNATURE  
Your signature affirms that you are a licensed WIAA official in good standing

WHITE COPY – Office YELLOW COPY – Payroll PINK COPY – Official  
 WHITE COPY – MPS/Athletics Office YELLOW COPY – Official

**SPECIAL INSTRUCTIONS**

- ❖ Please complete all information on the reverse side of this form. This information is necessary in the event that MPS Athletics needs to contact the game official to obtain additional information.
- ❖ It is very important that you make note on the form if the game/contest was completed/not completed/not played at all.
- ❖ Note any unusual circumstances on the form.
- ❖ Vendors without ID# and/or new employees should: **PLEASE CALL 475-8219 for the "PART A CONTRACT" to be sent or emailed**
- ❖ List all games/contests worked on the same day
- ❖ Submit WHITE ORIGINAL COPY – Must be signed by the host team coach and returned to the Interscholastic Athletics Office – Attn: MPS Athletics
- ❖ YELLOW COPY – Keep for your records!
- ❖ Prompt return of this pay sheet to MPS Athletics is important to insure timely payment!
- ❖ Game Pay Rate: **BSB-V \$55 JV-\$40 SB-V \$55 JV-\$40 Soccer-V \$51 JV \$40**
- ❖ Payroll questions, comments or concerns should be referred to the MPS Interscholastic Athletics Office at 414-475-8219.