

**LATE START & ADDITIONAL FEE FORM**

DATE \_\_\_\_\_

**RETURN WITHIN 5 BUSINESS DAYS OF THE CONTEST DATE**

SW BOCES/ SECTION 1  
2 WESTCHESTER PLAZA  
ELMSFORD, NEW YORK 10523

OFFICIAL #1 \_\_\_\_\_  
OFFICIAL #2 \_\_\_\_\_  
OFFICIAL #3 \_\_\_\_\_  
OFFICIAL #4 \_\_\_\_\_

FAX (914) 592-2940

SPORT \_\_\_\_\_ DATE OF CONTEST \_\_\_\_\_  
LEVEL \_\_\_\_\_  
HOME SCHOOL \_\_\_\_\_ VISITOR \_\_\_\_\_

**LATE START REQUEST**

REASON FOR LATE START \_\_\_\_\_

SCHEDULED START TIME \_\_\_\_\_ ACTUAL START TIME \_\_\_\_\_

COACH NOTIFIED: HOME \_\_\_\_\_ VISITOR \_\_\_\_\_

OFFICIALS SIGNATURE IN SCOREBOOK  YES  NO

START TIME IN SCOREBOOK  YES  NO

**ADDITIONAL FEE REQUEST**

(CHECK SPORT)

- WRESTLING       SWIMMING
- SOCCER             BASKETBALL
- GYMNASTICS       VOLLEYBALL       OTHER

TOTAL # OF BOUTS \_\_\_\_\_

ADDITIONAL QUARTERS \_\_\_\_\_

ADDITIONAL MATCHES \_\_\_\_\_

ADDITIONAL GAMES \_\_\_\_\_

ADDITIONAL HEATS \_\_\_\_\_

INDIVIDUAL COMPETITORS \_\_\_\_\_

OTHER \_\_\_\_\_