

# *Racine Gymnastics Booster Credit Voucher*

Team Member \_\_\_\_\_

Parent(s): \_\_\_\_\_

Event \_\_\_\_\_

Date \_\_\_\_\_

Task or contribution:

Hours Worked &/or \$:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

If more space is needed, please use the reverse side of this page.

Parent Signature: \_\_\_\_\_

Please place in the mailbox of the Vice President - Nathan Thompkins.