

**Organization:**

**Project:**

**Grant begins:**

**Grant ends:**

(Place check here to copy)

### **Tournament Registration Fee Receipt Form**

Date(s) of Tournament:

Sport:

\$\_\_.\_\_ per participant

\_\_\_\_\_ participants

\$\_\_\_\_\_.\_\_ = Total Paid

The Tournament Representative must sign below.

I certify that the above information is correct and that I have received payment of

\$\_\_\_\_\_.\_\_ for the Registration fees as described above.

\_\_\_\_\_  
Tournament Representative

\_\_\_\_\_  
Date