

AYSO Region 253 Spring Fundraiser

Team Name: _____ Age Division: _____

Coach's Name: _____ Team Parent's Name _____

Players Name	Amount of \$\$ Returned	Number of Candy Bars Returned	Comments	Sold Entire Box?
1.				<input type="checkbox"/>
2.				<input type="checkbox"/>
3.				<input type="checkbox"/>
4.				<input type="checkbox"/>
5.				<input type="checkbox"/>
6.				<input type="checkbox"/>
7.				<input type="checkbox"/>
8.				<input type="checkbox"/>
9.				<input type="checkbox"/>
10.				<input type="checkbox"/>
11.				<input type="checkbox"/>
12.				<input type="checkbox"/>
13.				<input type="checkbox"/>
14.				<input type="checkbox"/>
15.				<input type="checkbox"/>
TOTALS				

Coaches:

Please select at least one parent to collect the money and the leftover candy from each child on your team. Complete this form for your entire team (or designate a parent to help with this task). If the player sold the entire box of candy bars, please place a ✓ in the box in the column on the far right. This player is eligible for a \$5 discount off of next year's registration fees.

Total up the amount of money that you are turning in and the number of candy bars you are returning and bring this form with the money and candy bars to the tent at the fields.