

Delta/Greely Youth Hockey & Skating Association  
Contractor/Volunteer Monthly Invoice

Name to be printed on check:

\_\_\_\_\_

Date	# of Zams for Games/Practices	Team
		Before High School Practice
		Before 14u practice
		Before 12u practice
		Before 10u practice
		Before 8u practice
		Outdoor Rink
		Small Rink

Total Zams \_\_\_\_\_ X \$25

Total Due \_\_\_\_\_

Other work done: \_\_\_\_\_

Cost: \_\_\_\_\_

If donating services, which? \_\_\_\_\_

W9, Independent Contractor, & Release form must be completed in advance