DEPOSIT FORM

Date of the Event _____

Name of the Event _____

Amount of Money Taken In: $_____

Amount Paid to Director(s): _____= (1st 20 tables @$5)+ (tables over 20 @ $2)

Amount Paid to Caddies: $_____= ($30 per session)

Amount Paid for Drayage: $ _____

Total Table Count _____

Amount to be Deposited: $ _____

Signature of person counting the money and submitting the request:

Name _____

Email address: _____

Phone#:_____