CHEQUE REQUEST

Brantford Galaxy Youth Soccer Club
www.brantfordsoccer.com

Date:

Program (check one): Rep/Competitive ☐ House League ☐

Person Requesting Cheque:

Cheque Payable To:

Amount of Cheque:

Purpose of Cheque:

Please provide explanation if corresponding invoice or receipt is not attached:

(For club use only)

Amount of Cheque	Cheque #	Cheque Given To
$.		

Date: