VOUCHER

South Dakota Cross Country/Track & Field Officials Association and
All Sports Officials Advisory Council

Meet Date: _____

Meet Location: _____

Meet Level: ☐ High School ☐ Middle School

Mentee (New Offiicial) Information

Name: _____

Address: _____

City/State/Zip: _____

Mentor Information

Name: _____

Address: _____

City/State/Zip: _____

Prospective official works meet **($50.00) –** $_____

- Mentor will only be paid to evaluate on day not contracted or hired to officiate the same meet
- Mentee/New Official is 0-5 years experience
- **Attach evaluation of mentee to this form**
- Mentor may only evaluate one mentee per meet

SIGNED BY: _____ Date: _____

Send to:

SDCCTFOA
c/o Steve Charron
463 Broadland Creek Court
Huron, SD 57350
sscharron123@hur.midco.net