

**UTAH STATE UNIVERSITY
CAMPUS RECREATION**

SPORT CLUB REFEREE VERIFICATION FORM

Please Return To:

Utah State University
Campus Recreation-HPER 126
ATTN: Sport Clubs
Logan, UT 84322-7005

NAME: _____

ADDRESS: _____

PHONE: _____

SOCIAL SECURITY #: _____

SPORT CLUB: _____

DATE OF EVENT: _____

LOCATION: _____

DESCRIBE EVENT: _____

This certifies that I have performed the assigned duties of _____
for the aforementioned club team of Utah State University and that I am due in the full
amount of \$_____ for such services.

Club Representative Approval

Name (Print)

Signature