

Wrestling Dual Team Championships Third/Regional

NCHSAA Ticket Accountability Form and Play-off Financial Report

In order to better provide accountability of ticket sales in play-off contests, the following form has been developed. The meet director is responsible for completing this form and returning it along with a check to:

NCHSAA, Attention: Gary Cavanaugh, P.O. Box 3216, Chapel Hill, NC 27515.

<u>Wrestling</u> Sport	_____ Site	_____ Classification	_____ Date
Matches			
(1) _____	VS.	_____	
(2) _____	VS.	_____	
(3) _____	VS.	_____	

Admission Tickets Sold

<u>Beginning Number</u>	<u>thru</u>	<u>Ending Number</u>	<u>+ 1=</u>	<u>Total Tickets Sold</u>	<u>@</u>	<u>Sale Price Each</u>	<u>=</u>	<u>\$ Value</u>
	thru		+ 1=		@		=	
	thru		+ 1=		@		=	

Total Tickets Sold _____

A) Total Gate Receipts	(A)\$_____
B) Less: Endowment (\$1 per Ticket Sold)	(B)\$_____
C) Gross Revenue (Line A - Line B)	(C)\$_____
D) NCHSAA Share (.25 x Line C)*	(D)\$_____
E) Less: Allowable Expenses (which includes officials) **(MAX. \$500)	(E)\$_____
F) Net Revenue (C - D - E)	(F)\$_____

*Check to NCHSAA = NCHSAA Share (Line D) + \$1 per total # of tickets sold \$_____

**The net revenue (Line F) will be divided on a per match basis by the competing schools. Each school is responsible for its own expenses.

_____ Director's Signature	_____ School Name	_____ Date
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A copy of this ticket accountability form/financial report and a check for the NCHSAA share (Line D) + \$1 per total # of tickets sold must be in the NCHSAA office no later than 10 days following the date of the contest. This form is to be forwarded to the NCHSAA regardless of revenue. Failure to complete this form within the ten day limit is subject to a fine.

For office use only:

Date received: _____ **Check #** _____ **Check Amount:** _____