

GEORGIA HIGH SCHOOL ASSOCIATION  
P.O. BOX 271  
THOMASTON, GEORGIA 30286  
706-647-7473 FAX: 706-647-2638

**LACROSSE DOUBLE-HEADER GAMES STATE PLAYOFF FINANCIAL REPORT**  
(Use this form after Region/Area Winners are Determined)

DATE: \_\_\_\_\_

LACROSSE GAME: Boys: \_\_\_\_\_ and/or Girls: \_\_\_\_\_ Classification: \_\_\_\_\_

HOST TEAM: \_\_\_\_\_ VS \_\_\_\_\_

LACROSSE GAME: Boys: \_\_\_\_\_ and/or Girls: \_\_\_\_\_ Classification: \_\_\_\_\_

HOST TEAM: \_\_\_\_\_ VS \_\_\_\_\_

**GATE RECEIPTS:**

Number of Tickets Sold \_\_\_\_\_ @ \$10.00 Admission Fee = \_\_\_\_\_

RECEIPT OF BROADCASTING FEES ..... \_\_\_\_\_

TOTAL RECEIPTS..... \_\_\_\_\_

Total Number Admitted with GHSA Pass: \_\_\_\_\_

**DEDUCTIONS:**

(Note: Local service charges, stadium charges, lights, cost of operating personnel, etc., are not to be deducted prior to the division of funds. All such expenses are the responsibility of the home or host team. It is not necessary to clear the stadium between games. **GHSA %, Officials Fees, and Visiting Team mileage must be paid regardless of gate receipt amount.**)

20% of Total Receipts to GHSA \_\_\_\_\_

Lacrosse Officials Fees (Pay to Officials Association – will receive invoice) \_\_\_\_\_

**BALANCE:** ..... \_\_\_\_\_

Visiting Team Mileage \_\_\_\_\_ (80 cents per mile one way) \_\_\_\_\_

Visiting Team Mileage \_\_\_\_\_ (80 cents per mile one way) \_\_\_\_\_

BALANCE: ..... \_\_\_\_\_

¼ to Visiting Team \_\_\_\_\_ (plus mileage shown above) \_\_\_\_\_

¼ to Visiting Team \_\_\_\_\_ (plus mileage shown above) \_\_\_\_\_

½ to Host Team \_\_\_\_\_

\_\_\_\_\_  
(Signed)