

## Western Reserve Rowing Association Coach/Coxswain Timesheet 2019

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Date	Pay Rate → Coach/Cox & Team # ↓	SRL/FRL	Recreational Performance	Masters	LTR	LTS	Other
		\$	\$	\$	\$	\$	\$
<b>Total for each</b>							
						<b>Grand Total</b>	\$

Signatures: Coach / Cox : \_\_\_\_\_

Program Director/ Coaching-coxing Director : \_\_\_\_\_

*Shared Responsibilities:*

1. Coach/coxswain to complete this form and submit it to either the Program Director or Director in Charge within 30 days of service provided.
2. Approved forms must be received by the 1<sup>st</sup> and 15<sup>th</sup> of the month. Checks will be issued on the 8<sup>th</sup> and 22<sup>nd</sup> of the month.
3. All coaches and coxswain must complete a current Form W-9 each year prior to the issuance of your first check.
4. If your check is lost or stolen, please contact the Treasurer immediately for a replacement.

Please direct any questions to: [Treasurer@WesternReserveRowing.com](mailto:Treasurer@WesternReserveRowing.com)