



GATE SHEET STYLE 3 (INVERTED)

EVENT: _____

BRANCH: _____ DATE: _____

MERCHANT FEE: _____

FAMILY CAP: _____

ADULT SCA MEMBER
FEAST FEE

YOUTH (AGE RANGE)

CHILD (AGE RANGE)

SITE FEES

	SCA NAME	MODERN NAME	BRANCH	ADULT ✓	MINOR <input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	SCA MEMBERSHIP# /EXPIRY DATE	BLUE CARD OR WAIVER <input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER						
1					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
2					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
3					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
4					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
5					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
6					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
7					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
8					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
9					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
10					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
11					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
12					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
13					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
14					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
15					<input type="checkbox"/> YOUTH <input type="checkbox"/> CHILD	# _____ EXP _____	<input type="checkbox"/> BLUE CARD <input type="checkbox"/> WAIVER	CASH <input type="checkbox"/> CHECK <input type="checkbox"/>	\$	\$	\$	\$	
									TOTAL PAID	SITE FEE (IF MERCHANT SITE FEE, PLEASE TICK "M" BOX)	FEAST	NMS (\$3 USD, \$4 CAD)	