

Sectional Pass Gate Record

Sectional Site _____

Date of Contest _____ Sport _____

Contest _____ vs _____

Pass Gate Attendant _____

<u>Pass #</u>	<u>Type of Pass</u>					<u>Name of Pass User</u>	<u>Photo ID</u>
	<u>Lifetime</u>	<u>EC Pass</u>	<u>School Admin. Green Pass</u>	<u>Sport Coord</u>	<u>NYSPHSAA</u>		
							1
							2
							3
							4
							5
							6
							7
							8
							9
							10
							11
							12
							13
							14
							15
							16
							17
							18
							19
							20
							21
							22
							23
							24
							25

Please fax to Wayne Bertrand, Executive Director, @ 306-4503 following the conclusion of the contest.