OHSAA FOUNDATION CONTRIBUTION FORM



**2022-23 OHSAA Foundation Service Week**

**CONTRIBUTION FORM**

|  |  |
| --- | --- |
| **Host School:** |  |
| **Opponent(s):** |  |
| **Event Date:** |  |

|  |  |
| --- | --- |
| Check #(s): |  |
| Check(s) submitted on behalf of which school(s): |  |
| Contact Name: |  |
| Contact Number: |  |
| Contact E-Mail: |  |