

Oswego Figure Skating Club
Basic Skills Instructor Payment Form

Name _____ Phone Number _____

Address _____
Street
City
State
ZIP

Month/Year _____

Date	Number of Groups/Levels taught	Instructor Fee (\$15)	Total for Date
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
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21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
Monthly Totals			

Instructor Signature _____ Date _____