



CALIFORNIA INTERSCHOLASTIC FEDERATION

NORTHERN SECTION

Elizabeth Kyle, Commissioner
2241 St. George Lane, Suite 2
Chico, CA 95926

Telephone: 530-343-7285
Fax: 530-343-5619
website: www.cifns.org
E-mail: lkyle@cifns.org

MILEAGE REQUEST

This form should be completed and returned to the Northern Section Office as soon as possible after the event. One month grace period will apply. (See pages FB/6 and BK/5 in the NSCIF Playoff Guidelines.)

School:

_____ vs _____ Sport _____

Date Held _____ Division _____

Beginning Mileage _____ Ending Mileage _____

Traveled from _____ To _____

Principal's Signature

High School

Date Requested

PLEASE FILL IN THIS PORTION which will be returned with your mileage check

Attached please find your check to cover mileage for

_____ Playoff Game which was held on _____
Sport _____ Date _____