

**JEFFERSON AREA LOCAL SCHOOL DISTRICT
PAY TO PARTICIPATE POLICY**



2016-2017

- 2016-2017 payment periods are as follows:
 Fall Sports/Activities: August 8-26, 2016
 Winter Sports/Activities: November 7-25, 2016
 Spring Sports/Activities: February 27-March 17, 2016
- Please complete a separate form for each student/athlete
- Please make checks payable to "Jefferson Area Local School District"
- Return this form along with payment to: High School Office or Junior High School Office

Student/Athlete: _____ **Grade:** _____

Please check box if student listed above has met the payment maximum.

HIGH SCHOOL ACTIVITIES:

\$100 Fee: Sport/Cheerleading/Marching Band

\$25 Fee: Show Choir/Drama

Student Maximum: \$200 per Senior High School Student

FALL SPORTS	X	WINTER SPORTS	X	SPRING SPORTS	X	EXTRA/ CO-CURRICULAR	X
Cheerleading (Football)		Basketball		Baseball		Show Choir	
Cross Country		Cheerleading (Basketball)		Softball		Fall Musical/Spring Drama	
Football		Wrestling		Tennis (Boys)		Marching Band	
Golf				Track & Field			
Soccer							
Tennis (Girls)							
Volleyball							

JUNIOR HIGH SCHOOL ACTIVITIES:

\$50 Fee: Sport/Cheerleading

Student Maximum: \$100 per Junior High School Student

FALL SPORTS	X	WINTER SPORTS	X	SPRING SPORTS	X	EXTRA/ CO-CURRICULAR	X
Cheerleading (Football)		Basketball		Track & Field		No Fee	
Cross Country		Cheerleading (Basketball)					
Football		Wrestling					
Soccer							
Volleyball							

I/We, as parent(s)/legal guardian(s) of the above named student/athlete have read and understood the policies and guidelines set forth for the Pay to Participate programs at the Jefferson Area Local School District.

Parent/Guardian Name(s) (Please Print) _____

Parent/Guardian Signature(s) _____

Phone Number (_____) _____ Date _____

***Fees must be paid during the sport/activity payment period or the student will not be permitted to participate. All activities listed may not be offered each year.**

***Refund Policy:** 100% refund if the student/athlete: is injured and the injury occurs before the first contest (with doctor's written orders); moves out of the district prior to the first contest; is cut from the team.

No refund if the student/athlete: is deemed academically ineligible; quits the team; is removed for disciplinary reasons.

(For Office Use) Date Paid: _____

Cash: _____

Amount: _____

Check #: _____