



TECUMSEH PUBLIC SCHOOLS ATHLETIC PARTICIPATION FEE REGISTRATION

Athlete Last Name: _____

Athlete First Name: _____

Please staple your check or money order made out to Tecumseh Athletics to the bottom of this form and return to the High School Athletic Office

Address: _____

City: _____ **Zip:** _____ **Phone:** _____

Sport(s): _____ **Grade:** _____

Please check one of the following:

- ATTACHED IS MY FEE OF (CIRCLE ONE)**

\$100 - HIGH SCHOOL, 1ST SPORT

\$65 – HIGH SCHOOL, 2ND SPORT

\$70 - MIDDLE SCHOOL, 1ST SPORT

\$40 – MIDDLE SCHOOL, 2ND SPORT

- I RECEIVE REDUCED LUNCH (CIRCLE ONE)**

\$65 – HIGH SCHOOL

\$40 – MIDDLE SCHOOL

- I RECEIVE FREE LUNCH (ATHLETIC PARTICIPATION FEES WAIVED)**

I understand that the fee that I am paying **does not guarantee playing time**, control over any conditions of the team, and is not refundable except as indicated in the policy. I also understand that paying the fee does not alter Tecumseh Board of Education Student Policies, Michigan High School Athletic Association regulations, the Tecumseh High School District's Athletic Code, and/or individual team rules.

Student Signature: _____

Parent Signature: _____

Date: _____

Check number: _____

**Staple
Check
Here**