



Peters Township School District

Athletic and Activity Fee Form

Turn this form into Mr. Keszorek before July 25, 2022.

Students in Peters Township High School and Middle School are required to pay Athletic and Activity Fees to offset the cost of transportation, equipment, supplies and other expenses associated directly with student athletics and High School activities. Please see the reverse side for fee amounts and applicable groups.

Please complete the form below and return it along with your check or money order (no cash) made payable to: **Peters Township School District**

- **NEW:** Athletic fees are due **PRIOR TO TRY-OUTS/PRACTICES**. No student will participate until the fee is paid.
- High School & Middle School **Athletic Fee & form** should be submitted to the Athletic Office at the High School – 121 Rolling Hills Drive, McMurray 15317
 - Please pay High School and Middle School fees separately
- Fees for High School **club activities** are to be submitted to the group sponsor at the second meeting of the organization.

Circumstances Eligible for Reimbursement: Any athlete who sustains a documented (applicable doctor's note) season-ending injury within the first seven days of the first WPIAL recognized game, and the athlete decides to not stay with the team within those seven days, he/she is eligible to have their fee reimbursed by the District. After the try-out period, any athlete who is not selected will be eligible for reimbursement. Fee reimbursements will not be issued if a student quits a team for reasons other than specified above. Please contact the athletic office via e-mail (christopherj@pt-sd.org) if eligible for reimbursement **within the first month of the season**.



Submit this section

Peters Township Marching Band Fee: \$40.00 per member.

Peters Township School District Athletic/Activity Fee: **2022 - 2023** School Year

Make checks payable to: **Peters Township School District or PTSD**

Student Name: _____ Sport/Activity: _____

Parent/Guardian Name (please print): _____ Student Grade: _____

Parent/Guardian Signature: _____ Date: _____

I acknowledge and understand that the Athletic/Activity Fee must be paid prior to the end of the first week of practice or prior to the second activity club meeting in order for my son/daughter to participate.

For Office Use Only

PAID

Via Check: Check # _____

Via Money Order: Date _____

Received by: _____

Date: _____