

**SCHOOL DISTRICT OF THE CITY OF HAZEL PARK
PAY-TO-PARTICIPATE CONTRACT 2011-2012**

Please Print

Name of Student _____ Grade _____

Address _____ City _____ Zip _____

School _____ Home Phone _____

Parent(s)/Guardian(s) _____ Day Phone _____

Sport(s) _____ Check# _____

I understand that the payment of the Pay-to-Participate fee does not guarantee playing time for the student athlete, and does not provide any control over conditions of the team or the Athletic Department. I also understand that paying the fee does not in any way alter Board of Education Policy, the District's Co-Curricular Code of Conduct, individual team rules or the Michigan High School Athletic Association Regulations.

I also understand that there will be no refunds of the Pay-to-Participate fee unless the student athlete suffers a season-ending injury prior to the mid-point of the season, preventing the student athlete from participating in one-half of the regularly scheduled contests. In this instance, a physician's letter must accompany the request for a refund.

It is understood that a student athlete will not be allowed to participate in contests unless all signatures are affixed to the contract and the fee has been paid in full. The fees are as follows:

- ◆ \$75.00 per sport for each high school and middle school athlete.
- ◆ Third sport for middle school athlete is free.
- ◆ There is an annual family cap of \$300.00.

Payment can be made via:

- ◆ Cash.
- ◆ Checks made payable to the Hazel Park High School.
(A \$20.00 fee will be charged for any returned checks.)
- ◆ Money Orders payable to the Hazel Park High School.

I have fully read and understand the Pay-to-Participate Contract.

Student Signature Parent/Guardian Signature Date

Please return the signed Pay-to-Participate Contract to the Athletic Department.

Office Use Only: \$ _____ Check# _____ Rec. by _____ Date _____