

# Yearly Triway Activity Fees – Athletics, Marching Band, Show Choir

- A yearly activity fee of \$100.00 per student with a family cap of \$200.00 will be charged per school year, per family.
- The fee will be charged for Junior High and High School Athletic events plus High School Marching Band & Show Choir.
- These forms must be on file in the athletic office. Failure to do so will result in the student being denied participation until all paperwork is on file.
- A refund will be granted to a student that has been cut from the sport.
- Refunds will not be granted to students that violate the school policy or abandon the sport.
- All refunds must be approved by the building Principal, Mr. Wharton/Mr. Stutz and Athletic Director, Mr. Honza.
- If using the payment plan, if the payment is late or missed the student will not participate in the next scheduled contest until the payment is received.

\*\*\*\* The payment plans are as follows:\*\*\*\*

Fall Sports

2nd Monday of August \$40.00  
 4th Monday of August \$30.00  
 2nd Monday of September \$30.00

Winter Sports

2nd Monday of November \$40.00  
 4th Monday of November \$30.00  
 2nd Monday of December \$30.00

Spring Sports

1st Monday of March \$40.00  
 3rd Monday of March \$30.00  
 1st Monday of April \$30.00

- Any student joining any team after the sport starts must pay the activity fee or start the payment plan schedule as determined by the building Principal.
- If you have any questions please feel free to call the Triway High School office at 330-264-8685.

\*\*\*\*Please retain the top portion and return the bottom portion with your payment\*\*\*\*

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Fill out information below and return to your Head Coach

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Check #: \_\_\_\_\_ Cash: \_\_\_\_\_ Amount: \_\_\_\_\_

Please make checks payable to: Triway

I, as parent/or legal guardian of the above student, have read and understand the policies and rules set forth for the Activity fee.

\_\_\_\_\_  
 Signature of parent/legal guardian

\_\_\_\_\_  
 Date