



2020-2021 All-Sport Family Pass Application

Name _____

Phone Number _____

Address _____

Zip Code _____

E-Mail Address _____

Type of Pass: (Please make checks payable to Centerville Athletics)

We are accepting payment plans. Please contact our office at (937) 439-3516 for details.

_____ Fall, Winter and Spring - \$270.00 (limit of 6 – each additional pass is \$25.00 per card)

_____ Fall and Spring - \$135.00 (limit of 6 – each additional pass is \$25.00 per card)

_____ Winter and Spring - \$135.00 (limit of 6 – each additional pass is \$25.00 per card)

The Following individuals reside at the above address and are to be included in this 2020-2021 All-Sport Family Pass Application

- 1) _____ 2) _____
- 3) _____ 4) _____
- 5) _____ 6) _____

Signature of Applicant _____ Date _____

For Office Use Only

Date Received _____ Amount Received _____ \$135 _____ \$270

Number of passes assigned _____ Cash _____ Check # _____

Type of pass purchased

Fall, Winter & Spring

Fall & Spring

Winter & Spring