Parkview Athletic Fee/Form Collection Policy

PARKVIEW
MIDDLE SCHOOL
ASHWAUBENON SCHOOL DISTRICT
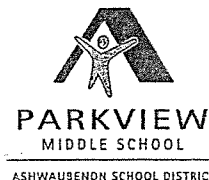
The collection process is as follows:

1. The Athletic fee must me paid BEFORE any inter-school athletic competition can occur. Extenuating circumstances can occur so this stipulation is subject to administrative review.
2. Every student involved in Parkview athletics makes the team. In addition to no cuts, every athlete is given significant playing time to feel a part of the team. Refunding fees for cuts will not be an issue at Parkview.
3. If a child is injured they are still on the team so a refund should not be an option. Extenuating circumstances can occur so this stipulation is subject to administrative review.
4. If a child chooses to quit the athletic team due to any reason, there should be no refund forthcoming. Extenuating circumstances can occur so this stipulation is subject to administrative review.
5. All checks should be made out to Parkview Middle School.
6. The Parkview Athletic Fee and Form will be collected at the beginning of each sport season by the coaches and given to the Athletic Director. An educational assistant will keep a listing of fees/forms. The form attached to this document will be kept on file for one year for verification purposes.

Below is the form that will be distributed to all Parkview athletes by the coaches prior to each season.

If you have any questions, please contact Scott Conradt sconradt@ashwaubenon.k12.wi.us

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Parkview Middle School Student Activity Fee

PARKVIEW
MIDDLE SCHOOL
ASHWAUBENON SCHOOL DISTRICT

Middle school students that have chosen to participate in Middle school activities will be assessed an activity fee of $20.00. There will be a $75.00 maximum fee per family in the Ashwaubenon School District for activity fees. The activity fee is a one-time charge for the entire school year regardless of the number of activities each child participates in.
Please make check payable to Parkview Middle School.
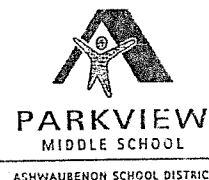
Parent/Guardian Name_____ Date_____

Address_____ City/Zip_____ Home Phone____

Amount Paid $_____ *Paid by:* ☐ CASH *or* ☐ CHECK #_____ *Check Number*

STUDENT LAST NAME	FIRST NAME	GRADE	ACTIVITY(S)
1			
2			
3			
4			