

**SCHOOL DISTRICT OF THE CITY OF ROYAL OAK
ATHLETIC DEPARTMENT
PAY TO PARTICIPATE CONTRACT
2009-10**

Name of Student _____

Address _____ City _____ Zip _____

School _____ Grade _____ Home Phone _____

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

Sport(s) _____ Check # (if applicable) _____

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, including practice, unless all signatures are affixed to this Contract and the fee has been paid in full. The fees are as follows:

- \$100 per sport for each high school athlete. There is a \$250 annual student cap.
- \$75 annual, one-time fee for each middle school athlete.
- There is an annual family cap of \$500.

Payments can be made via:

- Credit card (VISA and Mastercard)
- Checks made payable to the School District of the City of Royal Oak
- On-line through PaySchools (link is available on the District Website)

Additional information regarding the Co-Curricular Code of Conduct is available on the District's website, www.royalookschools.com.

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

Student Signature

Parent/Guardian Signature

Date

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