

2017-2018
School Year

GENEVA AREA CITY SCHOOLS
PAY TO PARTICIPATE POLICY

The Geneva Area City Schools Board of Education has instituted a pay to participate fee for all extra-curricular and/or co-curricular activities. The fees for the **2017-2018 school year** are listed below:

High School Athletics (Grades 9-12)	High School Extra/Co-Curricular Programs
\$100 for first sport \$100 for second sport \$200 maximum per athlete \$400 family maximum (grades 7-12)	\$100 per student covers all bands
	\$50 per student covers all choirs
	\$25 each for Fall Play, Musical, One Act includes actors and crew
	\$150 maximum per individual
	\$300 family maximum

<u>Middle School Athletics (Grades 7-8)</u>	<u>Middle School Extra/Co-Curricular</u>
\$100 fee covers up to three sports	No cost to participate in extra/co-curricular programs other than sports

The student/athlete/family are to turn in the enclosed form with payment on or before the official **“Due Date.”**

- Once payment is received, there will be no refunds other than those listed under the “Refund Policy” below.
- Managers, statisticians, and scorekeepers are excluded from Pay to Participate fees.
- Please complete a separate form for each student/athlete
- Please make checks payable to **“Geneva Area City Schools”**
- For the middle school, the One Time flat fee must be paid in the entire amount regardless of the number of sports in which your child plans to participate. This fee covers participation in all sports throughout the school year.
- **A maximum per family limit has been set at \$400 for Athletics and \$300 for Extra/Co-Curricular Programs**
- **Until August 15th, checks or money orders for fall sports/extra/co-curricular fees may be mailed or brought to the Board of Education office:**

Geneva Area City Schools
135 S. Eagle Street
Geneva, OH 44041
Attention: Amy Richmond

- **After August 15th, checks or money orders for all payments should be mailed or brought to the high school or the middle school**

Refund Policy:

- 100% refund if the athlete is injured and the injury occurs before the first contest. (Applies only if the athlete’s season is ended by injury per a doctor’s written orders)
- 100% refund if the student moves out of the district prior to the first contest.
- 100% refund if the student is cut from the team.
- No refund if the student/athlete is deemed academically ineligible.
- No refund if the student/athlete quits the team or is removed for disciplinary reasons.

A PAID PARTICIPATION DOES NOT GUARANTEE THAT A STUDENT-ATHLETE WILL PLAY. THE CONTROL AND DETERMINATION OF PLAYING TIME WILL REMAIN THE RESPONSIBILITY OF THE COACHING STAFF.

The Superintendent shall have final say over any discrepancies that may arise.

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Please review the due dates to the right of the sport for when your full payment is due

HIGH SCHOOL ATHLETICS/EXTRA CURRICULAR

Fall Sports	Due Date	Winter Sports	Due Date	Spring Sports	Due Date	Extra/ Co-Curricular	Due Date
Football	8/1/17	Girls Basketball	11/1/17	Baseball	2/23/18	Band \$100	Before participation
Cheerleading (Football)	8/1/17	Boys Basketball	11/8/17	Softball	2/23/18	Choir \$50	Before participation
Golf	8/1/17	Cheerleading (Basketball)	11/8/17	Track & Field	3/5/18	Three Act \$25	Before participation
Girls Soccer	8/1/17	Wrestling	11/10/17	Boys Tennis	3/5/18	Musical \$25	Before participation
Boys Soccer	8/1/17					1 Act Plays each \$25	Before participation
Volleyball	8/4/17						
Girls Tennis	8/1/17						

MIDDLE SCHOOL ATHLETICS: \$100 flat fee for all sports; Extra/Co-Curricular: No Fee

Fall Sports	Due Date	Winter Sports	Due Date	Spring Sports	Due Date	Extra/ Co-Curricular
Football	8/1/17	Girls Basketball	After Tryouts	Track & Field	03/12/18	No Fee
Volleyball	8/4/17	Boys Basketball	After Tryouts			
Soccer	8/11/17	Wrestling	11/10/17			

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Student/Athlete: _____ **Grade:** _____

I/We, as parent(s)/legal guardian(s) of the above named student(s)/athlete(s) have read and understood the policies and guidelines set forth for **Pay to Participate** programs at Geneva Area City Schools.

Parent/Guardian Name (Please Print) _____

Parent/Guardian Signature _____

Phone Number () _____ **Email:** _____ **Date:** _____

Activity (check all that apply): Sports Band Choir Fall Play Musical One Act Play

***Sports you are paying for:** _____

Please make checks payable to "Geneva Area City Schools" Payment Amount: _____

Please list other siblings participating in sport(s) and/or activity:

Name	Grade

Contribution for a Student In Need of Financial Assistance

I would like to make a contribution to be used as a donation towards the participation fees for a student other than my child.

Amount of Donation: _____ **Student's Name:** _____ **Grade:** _____

Activity (check all that apply): Sports Band Choir Fall Play Musical One Act Play

*******RETURN THIS PAGE WITH YOUR FULL PAYMENT**

(For Office Use Only) Received by: _____

Date Paid: _____ Check: _____

OR

Amount Paid: _____ Cash: _____