WEST SHORE SCHOOL DISTRICT Request for Waiver of Activity Fee • 2017-2018

PARENT/GUARDIAN: Please provide the information requested below for the student(s) and activities you are requesting a waiver of activity fee(s). Return signed form to the school office.

| Student's Formal Name | | hool ode | | Activities | | | |
|--|---|----------------------|--|--------------|--|--------------------|----------|
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| _ | | | | | | | |
| chool Codes - CC | : Cedar Cliff R | L : Re | d Land A l | L: Allen CI | M : Crossroad | ds NC : New | Cumberla |
| igible Activities | Sports | | | | | | |
| Fall (| (Grades 7-12) | ٧ | Vinter (Grad | des 7-12) | Spring (Gr | rades 7-12) | |
| Cross C Jr. High Field Ho Jr. High Football Freshma Golf Marchin Boys So Girls So Girls Te | Cheerleading Cross Country Jr. High Cross Country Field Hockey Jr. High Field Hockey Football Freshman Football Golf Marching Band/Guard Boys Soccer Girls Soccer Girls Tennis Girls Volleyball | | Boys Basketball Girls Basketball Freshman Boys Basketball Freshman Girls Basketball Jr. High Boys Basketball Jr. High Girls Basketball Indoor Guard Swimming/Diving Wrestling Freshman Wrestling | | Baseball Softball Jr. High Boys Soccer Jr. High Girls Soccer Boys Tennis Boys Track Girls Track Jr. High Boys Track Jr. High Girls Track Boys Volleyball Jr. High Girls Volleyball | | |
| equest for conside | eration based ι | ıpon: | | | | | |
| Student(s) qualify | y for Free and F | Reduc | ed Price So | chool Meals | | | |
| Residential Place | ement at (Facilit | y Nan | ne): | | | | |
| Financial Hardsh | ip - Please prov | vide in | formation t | pelow that v | vill help us wi | ith a decision | |
| certify that the abo | ove information | is tr | uthful and | accurate: | | | |
| Parent/Guardian's Si | gnature | | | | | Date | |
| Email Address | | Daytime Phone Number | | | | | |
| FFICE USE ONLY | | | | | | | |
| Administrative Signa | ture | | | | | Date | |

Reason(s):

☐ Approve

☐ Disapprove