

CALVIN CHRISTIAN HIGH SCHOOL
PAY-TO-PARTICIPATE APPLICATION FORM
2018 - 2019

Name of athlete _____

Name of sport he/she will be participating in _____

Parent(s) Name _____

Parent email address _____

It is a privilege to participate in athletics at Calvin Christian High School. It is essential that not only players but parents as well participate to ensure the viability and integrity of our sports programs. **The Athletic Department requires all parents to choose two concession/ticket slots per athlete per season.** Concessions are a critical fundraiser that provides funds for uniforms, equipment, and field maintenance for all of our student athletes. The Athletic Boosters will email parents instructions for signing up to help. You will be required to choose two slots by a certain date or the slots will be assigned for you.

Thank you for supporting your athlete and CCHS Athletics. If you have any questions, please contact our Athletic Director, Tom Bouma, at 538-0990 or tbouma@gccsmi.org or Nicki Bouma at [446-4534](tel:446-4534) or nicki.bouma@yahoo.com.

The above named student must have the following requirements completed:

- Officially enrolled for the 2018-19 school year.
- Have a current medical examination form (dated April 15, 2018 or after) on file in the high school office or included with this application. **Make sure all signatures are included.**
- The Pay-to-Participate fee of **\$95.00** must be included with this application form (*cash or checks made payable to Calvin Christian High School*).

The yellow Pay-to-Participate card must be handed in at the first day of practice/tryouts for the winter season which is Monday, November 5, 2018.

No yellow card = No participation.

For office use only:

Payment form (cash/check #) _____ Card was given to _____ on _____