

ACTIVITY FEE REGISTRATION FORM

**** FORM ONLY TO BE USED FOR PAYMENT BY CHECK ****
ONLINE PAYMENTS ACCEPTED AT www.MyPaymentsPlus.com



Student Name _____

Grade _____

Parent/Guardian name _____

Home Address _____

Activity to Which the Check is Dedicated (check one):

_____ Sport (please specify one) \$100.00 _____

_____ Marching Band/Rifle Squad/Color Guard (please specify one) \$100.00 _____

_____ Club/Activity (please specify one) \$25.00 _____

I understand that refunds will only be made if the student does not make the team (cut).

I understand that the Activity Fee does not guarantee the student playing/participation time in any contest/competition, nor does it guarantee the student or his/her parents control over any conditions of the Team/Band/Squad.

Student signature _____

Parent/Guardian signature _____

Date _____

_____ I qualify for Free or Reduced Lunch and am requesting a waiver of the Activity Fee payment.

Instructions

- ✓ Please complete this form and mail it, along with the Activity Fee payment check (no cash) payable to Bridgewater-Raritan Board of Education by the designated payment due date to:

Bridgewater-Raritan Board of Education

Attn: Activity Fees

P.O. Box 6030

836 Newmans Lane

Bridgewater, New Jersey 08807

- ✓ Please note that a separate registration form and check must be sent in for each sport season.
- ✓ Please note that if your child qualifies for Free or Reduced Lunch then only the registration form must be returned by the due date.

ONLINE PAYMENTS ACCEPTED AT www.MyPaymentsPlus.com