

**APPLE VALLEY HIGH SCHOOL
FINE ARTS DEPARTMENT**

FINE ARTS FEE REFUND

Student's Name: _____ Activity: _____

Address: _____

City, State, Zip: _____

Date: _____ Grade: _____ Amount: _____

Reason for Refund: _____

Advisor, _____:

The above student is withdrawing from your activity. If he/she has turned in all materials and is free and clear of any financial obligations to the team, please sign your name and return this form to Kim Woods as soon as possible. Thanks!

Advisor's Signature

The above student has met the Apple Valley High School requirement for a refund in the amount of \$ _____ for the activity of _____

Director of Arts and Activities
Apple Valley High School