

# AMS ATHLETIC PASS

ANDOVER MIDDLE SCHOOL  
HOME OF THE TROJANS

DATE: _____
STUDENT: _____
STUDENT'S GRADE: _____
<b>*OFFICE USE ONLY</b>
PAYMENT: _____

- Family Athletic Pass \_\_\_\_\_ x \$200 \_\_\_\_\_
- Adult Athletic Pass \_\_\_\_\_ x \$ 50 \_\_\_\_\_
- Student Athletic Pass \_\_\_\_\_ x \$ 45 \_\_\_\_\_
- **TOTAL** \_\_\_\_\_

\*Please **PRINT** names to be listed on passes.

LAST NAME	FIRST NAME
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

<i>*Office Use Only</i>
_____
_____
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_____

Please make checks payable to **Andover Middle School**.  
*\*Payment may also be made online at the USD 385 website under the  
"Pay USD 385 Fees" in the QuickLinks section.*

**ANDOVER MIDDLE SCHOOL**  
1628 N ANDOVER RD  
ANDOVER, KS 67002  
316-218-4610

