

SWEDESBORO-WOOLWICH SCHOOL DISTRICT

"A Community dedicated to inspiring life-long learners"

15 Fredrick Boulevard

Woolwich Township, NJ 08085

Phone: 856-241-1552 Fax: 856-467-7041

www.swedesboro-woolwich.com

Dr. Walter J. Kappeler
Superintendent of Schools

Steven J. Jakubowski, Jr.
School Business Administrator

September 2021– For 2021-2022 School Year

Dear Swedesboro-Woolwich School District Parents and Guardians,

The Swedesboro-Woolwich School District will offer afterschool athletic activities in the Pay to Participate Program. The district has established a onetime fee of \$45.00 per child, maximum of \$90.00 per family for **ALL AFTERSCHOOL ATHLETIC ACTIVITIES**, for the 2021-2022 School Year. No student will be denied participation based on the ability to pay the participation fee.

Payment Options:

Checks made payable to Swedesboro-Woolwich School District, are accepted at your child's School Main Office. Participants will receive a receipt from the School's Main Office for any Pay to Participate payment. Payments are due, according to the activities schedule, before the first day of official practice. A form is available in the Main Office of your child's school or can be found on the Swedesboro-Woolwich website **www.swedesboro-woolwich.com**

There are two options for Waiver requests:

1. Students who qualify for Free and Reduced Lunch are eligible to be exempt from part or all of the Pay to Participate fee. Activity eligibility will be based on the current years Free and Reduced Lunch status. Free and Reduced Lunch status will be verified by Swedesboro-Woolwich School District after a **"Waiver of Confidentiality"** is signed.
2. Hardship waivers are accepted for students who do not qualify for Free and Reduced Lunch but who need financial assistance. Please briefly explain on the waiver request form the reason for the hardship request. Waiver requests, both Free and Reduced Lunch status and hardship waivers are available at your child's Main Office or at the Board Office.

Sincerely,



Dr. Walter Kappeler
Superintendent of Schools

Swedesboro-Woolwich School District
Athletic Activities
Participation Fee and Letter of Understanding

SCHOOL _____ **STUDENT ID NUMBER** _____

PAY TO PARTICIPATE FEE \$45.00/year (covers all athletic activities)

I have reviewed this form and understand that the fee paid does not guarantee playing time, control over any conditions of the team. I also understand that paying the fee does not in any way alter Swedesboro-Woolwich School District Board of Education Student Code of Conduct.

A student will not be allowed to participate unless all signatures are affixed and the fee has been paid. All students will be expected to pay the appropriate fee before the first activity they are participating in. The fee is non-refundable after start of practice.

Student name (Please Print) Parent/Guardian Name (Please Print)

Student Signature Date Parent/Guardian Signature Date

Address _____,

Which Activities Do You Intend to Play? Please Circle.

Boys'

Basketball (5th & 6th grade only)
Volleyball (5th & 6th grade only)
Flag Football (6th Grade)
Track (6th Grade)

Girls'

Basketball (5th & 6th grade only)
Volleyball (5th & 6th grade only)
Flag Football (6th Grade)
Track (6th Grade)

Make check payable to Swedesboro-Woolwich School District (SWSD).

AMOUNT PAID/ CHECK NO. _____

You will receive a written receipt at the time of payment

Students who qualify for free and reduced lunch may be eligible to be exempt from part or all of the Pay for Participation fee, **after review of your Pay to Participate Waiver Application.**

Students not eligible for free/reduced lunch but who need financial assistance **may submit a Pay to Participate Waiver Application.**

Are you requesting a waiver of the fee? _____ If so, please fill out and submit the Pay to Participate Waiver Form.

OFFICE USE RECEIVED by _____ DATE _____

Swedesboro-Woolwich School District

Athletic Activities

Participation Fee and Letter of Understanding

To request a waiver for the Pay to Participate Athletic fee, a student must meet one (1) of the eligibility requirements below:

1. **Free and Reduced Lunch (FRL) qualification** – Students who qualify for Free and Reduced Lunch are eligible to be exempt from part or all of the Pay to Participate fee. (Activities eligibility will be based on the previous year's Free and Reduced Lunch status).

_____ We are requesting Pay to Participate fee assistance based on Free and Reduced Lunch status. Free and Reduced Lunch status will be verified by Swedesboro-Woolwich School District

Name of Student: _____

Parent/Guardian's Name: _____

Address: _____

Home Phone: _____ **Work or Cell Phone:** _____

School: _____

2. **Hardship Waiver** - Students who do not qualify for Free and Reduced Lunch but who need financial assistance may check this part of form to request a full or partial waiver. Waivers can be granted to families who:

- a) Turn in this completed form signed and indicate how much your family is able to contribute.
Please explain briefly on the back of this form the reason for the hardship waiver request.
- b) Payment of the family contribution needs to be made by the start of the first day of practice.

_____ We would like to request a waiver for our student.

Name of Student: _____

Parent/Guardian's Name: _____

Address: _____

Home Phone: _____ **Work or Cell Phone:** _____

School: _____

The Pay to Participate Fee is \$45 for the school year. We can contribute: \$ _____

We understand the Pay to Participate Waiver rules stated above.

Parent//Guardian Signature: _____

Date: _____

Please return this form to your school's Main Office
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