SCHUYLKILL VALLEY SCHOOL DISTRICT

2025-2026 ATHLETIC PASS ORDER FORM

The cost of tickets for 2025-2026 athletic contests remains $5.00 for adults and $3.00 for students and senior citizens (age 60 and over). **All** spectators over the age of 5 are required to pay an admission fee for home events in the following high school sports - football, boys & girls soccer, boys & girls volleyball, boys & girls basketball, wrestling, swimming and other night events as may be deemed necessary. To encourage attendance by students, parents, family and friends at home athletic contests and to reduce the expense to those who regularly attend athletic events, athletic passes are sold at a substantial savings.

Senior citizens residing in the Schuylkill Valley School District are eligible to receive a free Senior Citizen Pass by coming to the Athletic Office from 8:00 am – 3:00 pm during days when school is in session. A driver's license or other form of identification to verify a district residency will be required for this pass. Free senior citizen passes will not be issued by mail.

The Adult Athletic Pass and the Student Athletic Pass are good for one person only. The Family Athletic Pass is valid for 2 adults and an unlimited number of children living at the same address. When filling out the Athletic Pass Order Form for a family pass, please list each family member separately. Individual passes will be issued for each person in the family.

Athletic passes may be purchased by returning this order form to the High School Athletic Office. **Athletic passes will not be sold at home games.**

Please note - This pass is not valid for BCIAA, District III or PIAA play-off games that are hosted on the Schuylkill Valley campus.

2025-2026 Schuylkill Valley Athletic Passes

_____ Family Athletic Pass @ $160.00 = $_____

_____ Adult Athletic Pass @ $60.00 = $_____

_____ Student Athletic Pass @ $25.00 = $_____

_____ Senior Citizen Pass (non-SV residents 60+) @ $25.00 = $_____

TOTAL AMOUNT OF ORDER: $_____

NAME/NAMES: _____ _____

_____ _____

_____ _____

ADDRESS: _____

City, State Zip

PHONE: _____

(Please list the names of each individual who should receive a pass.)

Return this form, along with check payable to **Schuylkill Valley Athletics**, to:
Schuylkill Valley High School, 929 Lakeshore Drive, Leesport, PA 19533.