Prepare Each Student to Be Successful
www.pointschools.net

Bliss Educational Services Center
1900 Polk Street, Stevens Point, WI 54481
Ph: (715) 345-5432 Fax: (715) 345-5431

STEVENS POINT
AREA PUBLIC
SCHOOL DISTRICT

Co-Curricular Fees
Secondary - Grades 7-12

TO: Parent/Guardian

FROM: School District Business Office

RE: Co-Curricular Participation Fees for Grades 7-12

Participation in co-curricular activities by students in grades 7-12 is encouraged. The information below explains:

A. Fee Schedule
B. Waivers, Reduced Fees, and Payment Options
C. Refunds

Please note that payment of activity fees does not assure equal participation by all participants at all levels. Though the district encourages as much fair and equal participation as possible for all children; there are situations in which the competitive nature of an activity does not allow for equal playing time.

A. Fee Schedule
Fee schedule is attached.

B. Waivers, Reduced Fees, and Payment Options
District policy allows a waiver or reduction of fees under certain circumstances. If you seek a waiver, a reduction in fees, or need to establish a payment option, please complete a Fee Waiver Request Form available in your school main office.

C. Refunds
Situations occur in which a refund is appropriate. To review criteria that explains such circumstances, please see the attached Request for Co-Curricular Fee Refund form.

Please note that the district athletic director approves all refunds for school sponsored athletic activities while principals approve refunds for clubs and school building activities.

All forms are available in the junior high office, the SPASH office, or online at the Business Office page of the district's website, www.pointschools.net

FEE SCHEDULE

STEVENS POINT AREA PUBLIC SCHOOL DISTRICT

Co-Curricular Fees 9-12	
Boy's Ice Hockey	**$500.00**
Tier I Activities	**Tier I Fee**
Football	**$150.00**
Basketball	**$150.00**
Baseball	**$150.00**
Soccer	**$150.00**
Volleyball	**$150.00**
Gymnastics	**$150.00**
Wrestling	**$150.00**
Softball	**$150.00**
Track	**$150.00**
Tier II Activities	**Tier II Fee**
Swimming	**$100.00**
Tennis	**$100.00**
Cross Country	**$100.00**
Golf	$**100.00**
Tier III Activities	**Tier III Fee**
Poms	**$50.00**
Cheerleading	**$50.00**
Fall Play	**$50.00**
Musical	**$50.00**
Showtime	**$50.00**
Activity Fee - All Students 9	**$50.00***
Activity Fee - All Students 10-12	**$50.00***
Co-Curricular Fees 7-8	
Tier I Activities	**Tier I Fee**
Football	**$50.00**
Basketball	**$50.00**
Baseball	**$50.00**
Soccer	**$50.00**
Volleyball	**$50.00**
Wrestling	**$50.00**
Softball	**$50.00**
Track	**$50.00**
Tier II Activities	**Tier II Fee**
Swimming	**$30.00**
Tennis	**$30.00**
Cross Country	**$30.00**
Poms	**$30.00**
Cheerleading	**$30.00**
Activity Fee - All Students 7-8	**$40.00***
	FAMILY MAXIMUM $800.00

*Activity Fees are not included in Family Maximum

Co-Curricular Fees
Request for Refund
Secondary – Grades 7-12

STEVENS POINT AREA PUBLIC SCHOOL DISTRICT

Complete this form to request a refund of co-curricular fees. The guidelines for approval or denial of refunds are stated below. A final determination regarding this request shall be made by the district athletic director for all school sponsored athletics or by the building principal for all clubs and activities.

A. Refunds

If a student is no longer able to participate in an activity due to circumstances beyond his/her control, a refund may be requested.

1. **Examples of requests eligible for refunds**:
   a) Participants who do not make a team following a tryout process
   b) A season ending injury
   c) A family leaving the district during an athletic season
   d) A family leaving the district during the school year for a year-long club or activity or before the club or activity begins
   e) A student who voluntarily terminates participation before the first game

2. **Examples of requests not eligible for refunds:**
   a) Participants who complete at least 50% of a season
   b) A student removed from participation for academic or disciplinary reasons
   c) A student removed from participation for athletic code or club/activity rules violations
   d) A student who voluntarily terminates participation after the first game

Refunds Request

Student Name_____ School_____

Sport, Club, or Activity_____

State reason for refund request:

_____

_____

_____

Signature of Student_____ Date_____

Signature of Parent/Guardian_____ Date_____
(Required if student is under age 18)

.....

If approved, make Check Payable To: _____

Street: _____ City: _____ Zip: _____

For Office Use Only:

_____ Refund Approved (Form sent to business office for processing)
_____ Refund Denied (Form and explanation returned to student or parent/guardian

Signature of Principal or Athletic Director: _____ Date:_____