



## Highland Local Schools Pay-to-Participate Guidelines

*(Please read all information carefully)*

The Highland Local Schools’ Board of Education instituted a participation fee effective January 4, 2010, for athletics, clubs and co-curricular activities in grades 6-12 that are supported by stipends for the coach/advisor. The purpose of this fee is to offset the expenses the BOE incurs while providing comprehensive athletic programs, clubs and co-curricular activities. This information sheet provides details for the entire District.

**Please make check or money order payable to Highland Local Schools *(note student name)*.**  
**Please note there is no payment plan or scholarship assistance available.**

- 1. The following activities listed on Page 3 of this document will require a fee of \$50, \$200 or \$250. Please note: There is a \$750 maximum per family.**
  - a. If a check is returned for non-sufficient funds (NSF), the participant will be immediately removed from the activity and will not be permitted to rejoin until a cash payment is made that covers the expense of the activity, as well as any fees charged by the bank for processing the NSF check.
  
- 2. Students approved for Reduced Lunch fee status (through the Federal Lunch Program) will be charged 50% of Pay-to-Participate fees. Students approved for Free Lunch fee status (through the Federal Lunch Program) will have Pay-to-Participate fees waived. To qualify for either waiver, parents must complete the “Sharing Information with Other Programs” form within FinalForms. Without this form, your student will be ineligible to have Pay-to-Participate fees waived.**
  
- 3. The fees must be paid in full by 3:30 p.m. on the following dates. High School and Middle School athletics should be paid at the High School Athletic Office. All clubs and co-curricular activities should be paid at the school office.**

Fall Sports:	First Official Day of Practice
Marching Band:	First Official Day of Practice
Fall Clubs:	First Official Organized Meeting
Winter Sports:	First Official Day of Practice
Winter Clubs:	First Official Organized Meeting
Spring Sports:	First Official Day of Practice
Spring Club:	First Official Organized Meeting

- 4. All forms and fees must be returned in a sealed envelope to the Athletic Department for athletes and to the High School or Middle School office for clubs and co-curricular activities.**
- 5. The Pay to Participate Fee DOES NOT guarantee any student playing time.**
- 6. Fees are non-refundable with the following exceptions:**
  - a. A sport or activity is canceled due to insufficient numbers.
  - b. Student does not make the team.
  - c. If a student suffers a season-ending injury prior to the first game (doctor's verification required).
  - d. If an athlete is permitted to go out for a sport after the starting date, fee payments will be accepted after the start date, but before the individual can begin practice.
  - e. Student moves out of the District prior to the first game.
  - f. If the student becomes academically ineligible before the first mandatory practice set by the OHSAA.
  - g. A student who is academically ineligible to begin the season but plans on practicing with the team with the anticipation of becoming eligible prior to the season-ending, still must pay the participation fee. If the athlete does not gain eligibility at any point during the season, the fee will be refunded.
- 7. No refunds will be issued after the season or activity starts (first mandatory OHSAA practice dates).**
- 8. Activity will be offered only when qualified coaches and advisors are available and hired by BOE.**
- 9. If the minimum number designated for a particular sport or activity is not reached by the deadline dates that particular activity will be canceled.**
- 10. If your family is unable to pay the fees required due to financial hardship, please contact the Athletic Department and speak with the Athletic Director. All phone calls and information shared will remain confidential.**
- 11. If you have any questions, please contact the Athletic Department at 330-239-1901, ext. 5401, or the director of your club.**

## Pay-to-Participate Fee Structure (Athletics, Clubs and Co-curricular Activities)

### \$250 FEE

HS Football  
 HS Volleyball  
 HS Soccer  
 HS Tennis  
 HS Cross County  
 HS Golf  
 HS Cheerleading (Fall)  
 HS Cheerleading (Winter)  
 HS Marching Band  
 HS Basketball  
 HS Wrestling  
 HS Baseball  
 HS Softball  
 HS Track  
 HS Flag Corp (Fall)

### \$200 FEE

MS Football  
 MS Volleyball  
 MS Cross Country  
 MS Cheerleading (Fall)  
 MS Cheerleading (Winter)  
 MS Basketball  
 MS Wrestling  
 MS Track

### \$50 FEE

MS Bowling Club  
 MS Drama Club  
 8<sup>th</sup> Grade Girls' Choir (after-school club)  
 8<sup>th</sup> Grade Boys' Choir (after-school club)  
 MS Jazz Band  
 MS Musical Production  
 MS Power of the Pen  
 MS Robotics  
 MS Newspaper  
 MS Ski Club  
 MS Yearbook  
 MS Golf Club  
 HS Newspaper  
 HS Chess Club  
 HS Speech/Debate Team  
 HS Jazz Band  
 HS Dance Team (Winter)  
 HS Robotics  
 HS Science Club  
 HS Ski Club  
 HS Swimming  
 HS Drama Club  
 HS Convolutions  
 HS Musical Production  
 HS Dramatic Production  
 HS Bowling Club

*\*students enrolled in theater tech. class will not be assessed a fee to complete the requirements of this course.*

**The following list of activities and clubs associated with leadership, recognition and volunteer service DO NOT require a fee:**

MS National Junior Honor Society (NJHS)  
 MS Student Council  
 HS AGST (Achieve Greatness Stay True)  
 HS DARE (Drug Abuse Resistance Education)  
 HS Key Club  
 HS National Honor Society (NHS)  
 HS Peer Leaders  
 HS SADD (Students Against Destructive Decisions)  
 HS Student Council  
 HS VOFT (Volunteer Opportunities For Teens)

# Highland Local Schools' Participation Fee Registration Form

This form must be returned with a check or money order payable to Highland Local Schools.

## Method of Payment

Date: \_\_\_\_\_ Check# or Money Order: \_\_\_\_\_ Amount: \_\_\_\_\_

Fee: \$250 for HS Sports, \$200 for MS Sports and \$750 Family Cap  
Clubs and Co-curricular Activities: \$50 fee per club or activity

Form should be completed for each student. Additional forms available online or at school.

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## FALL Sports and Clubs

HS Football  
 HS Volleyball  
 HS Soccer  
 HS Tennis  
 HS Cross Country  
 HS Golf  
 HS Cheerleading  
 HS Marching Band  
 HS Club ( \_\_\_\_\_ )  
( \_\_\_\_\_ )  
( \_\_\_\_\_ )

MS Football  
 MS Volleyball  
 MS Cross Country  
 MS Cheerleading  
 MS Club ( \_\_\_\_\_ )  
( \_\_\_\_\_ )  
( \_\_\_\_\_ )

## WINTER Sports and Clubs

HS Basketball  
 HS Wrestling  
 HS Cheerleading  
 HS Swimming  
 HS Bowling Club  
 HS Club ( \_\_\_\_\_ )  
( \_\_\_\_\_ )

MS Basketball  
 MS Wrestling  
 MS Cheerleading  
 MS Club ( \_\_\_\_\_ )  
( \_\_\_\_\_ )  
( \_\_\_\_\_ )

## SPRING Sports and Clubs

HS Baseball  
 HS Softball  
 HS Track  
 HS Tennis  
 HS Club ( \_\_\_\_\_ )  
( \_\_\_\_\_ )  
( \_\_\_\_\_ )

MS Track  
 MS Club ( \_\_\_\_\_ )  
( \_\_\_\_\_ )  
( \_\_\_\_\_ )

### **Parents: Please read and sign below**

I have read the guidelines as set forth by the Highland Local Schools' Board of Education regarding the rules and regulations of the Highland Participation Fee Program. I agree to abide by these regulations and to allow my son/daughter to participate in this program.

PARENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PARENT NAME (please print) \_\_\_\_\_



## ***Highland Local School District Pay-to-Participate Refund Request Form***

Date of request: \_\_\_\_\_ Date received: \_\_\_\_\_

Name of student applicant: \_\_\_\_\_

Name of parent or guardian: \_\_\_\_\_

Name of activity in which you wish to receive a refund: \_\_\_\_\_

**Reason for refund request:**

- |  |   |
|--|---|
| <input type="checkbox"/> Program cancelled   | Date cancelled: _____                                     |
| <input type="checkbox"/> Moved from district | Date withdrawn from school: _____                         |
| <input type="checkbox"/> Injured             | Date of injury: _____ ( <i>doctor's excuse required</i> ) |
| <input type="checkbox"/> Quit team           | Date quit the team: _____                                 |
| <input type="checkbox"/> Other               |   |

*The information offered above is to the best of my ability current, accurate and correct. Once approved, refunds will be submitted to the treasurer's office for payment. An attempt will be made to process and issue the refund within a 30-day time period.*

**Signature of parent/guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*\*Please note that this application does not guarantee that a refund will be authorized.*

**Send payment to:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**Administrative Use Only**

\_\_\_\_\_ Approved By

\_\_\_\_\_ Denied by

Reason for Denial: