

# St. Joseph Catholic School Athletic Department

Athlete's Name: \_\_\_\_\_ Class: \_\_\_\_\_

## ~Fees for the 2017-2018 Soccer Program~

<i>Fee</i>	<i>Amount</i>	<i>Paying</i>
Athletic Fee	\$40	
Booster Club	\$20	
Socks (required)		
-----	<b>Total Fees Paid</b>	

Both fees are mandatory for all student athletes; team managers are required to pay only the Booster Club fee. Please note that the Athletic Fee is required per sport while the Booster Club fee is paid only once per family per school year.

*~ Please make checks payable to St. Joseph Booster Club ~*

### ~ Return Policy and Cleaning/Replacement Fees ~

Uniforms are to be returned to the office at the end of the season in a bag with the athlete's name on it. They will be inspected and any concerns will be addressed. If necessary, you will be charged \$5 to have the uniform professionally cleaned. If the uniform is damaged and must be replaced, you will be notified of the replacement cost by Administration.

### ~ Carpool Authorization of Designated Drivers ~

I give my permission for my child, \_\_\_\_\_, to ride with any team member to a scheduled Catholic Grade School Conference game for St. Joseph Catholic School. It is understood, in the event of an accident, that neither St. Joseph School nor the Diocese of St. Augustine will be held in any way or part responsible. If this form is not on file at the school office, it is understood that only you, the parent, will transport the team player to a game. This authorization does not apply to siblings not on the team.

The following individuals **MAY NOT** transport my child to a team game:

\_\_\_\_\_

Printed Name of Parent: \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ (best for contact)

**Please return this form to the school office along with payment in an envelope labeled "Booster Club".**  
(Athlete will not receive a uniform or play until all fees are paid.)