

**York Suburban School District
STUDENT ACTIVITY FEE WAIVER APPLICATION**

If you would like to request that your student(s) be exempt from paying the Student Activity Fee for the current school year, please complete this form and return it to the Main Office at the High School or Middle School.

- In order to qualify for a fee waiver, students must receive Free or Reduced Lunch.*
- Requests will be kept confidential.
- A new waiver must be filed for each school year.

Parent/Guardian Name: _____ **Phone:** (____) ____ - _____

E-mail: _____ **School Year:** 20__ - 20__

<u>Student's Name</u>	<u>Grade:</u>	<u>Activity/Activities:</u>
1.		
2.		
3.		
4.		

If additional space is need, please use back and check here:

Reason for Request – Please provide a brief explanation:

The students listed above receive Free or Reduced Lunch.

By signing below, you are acknowledging that you are financially unable to pay this fee as it would place an undue financial burden on your family:

Parent/Guardian's Signature: _____ **Date:** ____/____/____

*If your family does not receive Free or Reduced Lunch, but has a true financial need, please contact the Athletic Director (717-885-1270x8002) to discuss your options.

Office Use Only:

Approved: ____ Denied: ____ By: ____ Date: ____/____/____ Notified: ____

Revised 7/15/15