

Murdock High and Middle Schools Athletic Dept.

Athletic Fee Payment Agreement

The following shall be considered a binding agreement in good faith among the athlete, the parent/guardian and the Murdock Middle or High School Athletic Department of the Winchendon Public Schools. *Please be aware that any failure to comply with this agreement, unless expressly permitted or excused by the Director of Athletics, may result in an athlete being removed from a team or sport and the amount owed will become part of his/her senior year financial obligations to the Winchendon Public Schools.*

Athlete Name: _____ **Grade** _____ **School Year** _____

Sport/Level: _____ (circle one) Varsity, JV, MS

Coach: _____

I will pay the athletic fee I owe in the following installments:

weekly \$ _____ **monthly \$** _____ **other \$** _____

I believe that I qualify for the federal free/reduced price lunch program. (check one)

☐ **YES** ☐ **NO**

I _____ (parent/guardian) agree to the above and I will pay the athletic fee, and each installment, according to this schedule. I am aware that any failure to fulfill my obligation under this agreement may result in exclusion of my child / children from the teams of Murdock Schools Athletic Department, unless the Director of Athletics exempts me from this agreement in whole or in part, for good cause.

Parent/Guardian signature

Athlete signature

Date: _____

Date: _____

As Athletic Director of Murdock High and Middle Schools, I **approve** this agreement.

Athletic Director or Principal