

Brighton Area Schools Athletics 2021-2022
Transportation Contract for:
HIGH SCHOOL BOYS LACROSSE

Student Athlete's Name

_____/_____**BHS**_____
Level (V-A, V-B, JV) / School

I, _____ understand that I/We are obligated to submit fees
Parent/Guardian Name

for our son/daughter to be transported to away contests (if assessed) for Athletics.

Please make *check payable to Brighton Athletics* for the Transportation Fee below:

\$__85.00__

Please return this *signed form* along with check *to your coach* by Friday, April 8th, 2022.

Payment in this amount accompanies this contract and I/We do hereby grant the above-named athlete's permission to be transported in the athletic program listed above. Make checks payable to Brighton Athletics. Please place student's name and sport on the memo line. DO NOT combine transportation payment with any other team payments (separate checks, please). Fees non-refundable.

FOR OFFICE USE ONLY:
Date_____
Check#_____/Cash_____
Amount_____

Parent/Guardian Signature

Address

Telephone

[PAPER CLIP PAYMENT HERE – NO TAPE, PLEASE]