

**UNIFORM PURCHASE AGREEMENT – (FORM B)**

**Uniform Voluntary Purchase as Personal Property**

*TOHS Softball*

Dear Parent/Guardian:

Please check your choice of the following options:

|  |  |
| --- | --- |
|   | My child ***does not*** intend to keep his/her SoftballUniform.(If selecting this option, please complete “Uniform Loan Agreement” (form A) |
|  |
|  | My child ***does*** intend to keep his/her SoftballUniform.(If selecting this option, please see below) |
|  |  |
| By signing below, I voluntarily agree to pay for the uniform and items listed below in full. By paying in full for these items, they will become personal property of and will belong to my child. As the personal property of my daughter, in the event that the uniform or items listed below are damaged, lost or stolen, I agree that I may be required to pay for repairs and replacement of the uniform and listed items for purposes of my daughter’s continued participation in the Softball Program. I agree that the uniform will be worn as made by the uniform company during the tenure of my daughter’s participation in the Program. While it is your personal property, your daughter’s uniform must match and be the same as the rest of the team during the tenure of his/her participation in the Program.  |
|  | Yes, I agree to pay full amount for the following **specific** Uniform pieces:[White Jersey] |
| Cost: $100.00 | Payment to be received by March 31,2022 |
|  |  |
|  | Yes, I agree to pay full amount for the following **specific** Uniform pieces:[Black Jersey] |
| Cost: $ 90 | Payment to be received by March 31,2022 |
|  |
| Participant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ |
|  |
| Address/City/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Please print) |
|  |
| PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Conejo Valley Unified School District

Donations, Fundraisers & Permissible Student Fees Guidance Manual