

**OTSEGO SCHOOL DISTRICT**  
**2013-2014 PAY-TO-PARTICIPATE REGISTRATION**  
**WAIVER**  
**ALL SPORTS, CLUBS & ORGANIZATIONS**

Name(Last) \_\_\_\_\_  
(First) \_\_\_\_\_

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Phone \_\_\_\_\_

**Parents/Guardians: Please read and sign below.**

I am applying for the Pay-to-Participate WAIVER. I confirm that my family is eligible for free or reduced lunch assistance.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Name (please print) \_\_\_\_\_