

ACTIVITY FEE PAYMENT FORM

(To be used only by those who Do Not Have Online Access to PaySchools Central)

	Year:						
	Guardian Name						
Fmail A	one Number: ddress:						
Name a	nd Address on Number:	Check:					
Check I	Number:		Amount	of Check:			
Studen	t Name:						
	paid for this stu						
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Activity/	Sport(s):						
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