

Lake Havasu High School
ATHLETICS
2675 S. Palo Verde Blvd.
Lake Havasu City, AZ 86403
928-854-5325

Student Name _____ Date _____

LAKE HAVASU HIGH SCHOOL ATHLETIC PAYMENT CONTRACT 21-22

I, the undersigned student and parent, hereby agree to pay to the Lake Havasu High School Athletic Department the amount of \$ _____ for Athletic Sports Participation Fee.

I agree to pay the amount of \$ _____ per _____ (ie weekly, monthly) on or before the _____ (ie first of the month). If I fall behind in payments or I do not have the fee paid in full by April 18, 2022 it will be reported as an obligation on my account. I understand that I will not be able to purchase dance tickets, participate in graduation ceremonies or receive registration or transcripts until it is paid in full.

Student Signature

Parent Signature