

**ST. MARGARET MARY CATHOLIC SCHOOL**  
**OUR COMMITMENT: "We will serve the Lord"**

**Activities Registration for the 2014/2015 School Year**

Student Name:	Student Name:
Grade in 2014-2015 School Year:	Grade in 2014-2015 School Year:
My child(ren) is interested in playing:	
Girls Volleyball (Aug.-Nov.)      _____	Girls Volleyball (Aug-Nov.)      _____
Cross Country (Sept.-Oct.)      _____	Cross Country (Sept.-Oct.)      _____
Boys Basketball (Oct. – Jan.)      _____	Boys Basketball (Oct. – Jan.)      _____
Spirit Squad (Nov. – Jan.)      _____	Spirit Squad (Nov. – Jan.)      _____
Girls Basketball (Dec. – Mar.)      _____	Girls Basketball (Dec. – Mar.)      _____
Boys Volleyball (Feb. – Apr.)      _____	Boys Volleyball (Feb. – Apr.)      _____
Track (April – May)      _____	Track (April – May)      _____
Please include payment (check made payable to St. Margaret Mary Athletics): \$75 first student, \$125 family maximum.	
Total Payment Enclosed:	Today's Date
Parent Name:	Parent Email:
Please contact the principal to make financial arrangements if this fee is too burdensome. Likewise, if you are in a position to help others, it would be appreciated.	