

2022-2023 Work or Pay Agreement

Name of Athlete(s):	
Name of Parent/Guardian:	
heck One)	
I agree to work 4 shifts shifts my check will be	as required and understand that if I do not work at leacashed.
I will serve as a Team l	Parent for the following sport
Please note that serving as a Team Parent	must be acknowledged/approved by the head coach
Please note that serving as a Team Parent	must be acknowledged/approved by the head coach as I do not wish to work.

This agreement must be signed and submitted with your \$400 Work-or-Pay Check that is due on or before your child participates in any high school athletic program. If not paid, you understand that your child will not be able to practice or participate in any athletic competition or scheduled practice until payment is made.