



OLD ORCHARD BEACH HIGH SCHOOL  
ACTIVITY FEE APPLICATION

Date: \_\_\_\_\_

PLEASE PRINT:

STUDENT NAME: \_\_\_\_\_ GRADE: 9 10 11 12

1ST ACTIVITY \_\_\_\_\_

2ND ACTIVITY \_\_\_\_\_

3RD ACTIVITY \_\_\_\_\_

TOTAL AMOUNT PAID: \_\_\_\_\_ Check No. \_\_\_\_\_ Cash \_\_\_\_\_

\_\_\_\_\_  
DATE: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE

PLEASE RETURN COMPLETED FORM FOR RECORD KEEPING PURPOSES

