To be filled out by I	Booster Rep	):	
TOTAL CARDS	TOTAI	_ AMOUNT	CC Last 4# / Check #:
		APPLICATION STRICT AT 2022/20	HLETIC PASS
<b>GENERAL</b> A	ADMISSIO	N FEES:	
			00 FOR ADULT, \$ 5.00 KIDS 00 FOR ADULT, \$ 3.00 KIDS. S EXCLUDED
CASH,	CHECK o	r CREDIT CARD (	See application information)
FAMILY PAS (MAX \$	t) \$150.00		
STUDENT P (1) (Studer	\$ 25.00 ge Student to age 22)		
ADULT PAS	\$ 60.00		
(Curren purcha	t & Retired on the second seco	100.00 w/ <i>Addt'l</i> stud	st show employee ID at time of ent pass) (Substitutes – excluded)
FAMILY LAST Nar Street Address	me		ESS YOUR APPLICATION:
City	Zip Code	E-mail _	
Home Phone:		Cell:	Work:
FIRST NAME of each receiving card / Last		"P" for parent or Student Grade	Student School

FIRST NAME of each person receiving card / Last if Different	"P" for parent or Student Grade	Student School

BY MAIL RETURN THIS FORM WITH CHECK PAYABLE TO:

MAIZE DISTRICT BOOSTER CLUB 11600 W. 45th St. North Maize, KS 67101

## CREDIT CARD INFORMATION FOR EMAIL PURCHASE OF BOOSTER PASS

FULL NAME		
ADDRESS		
CITY	STATE	ZIP
NAME ON CARD		
CC TYPE		
CC NUMBER		
EXPIRATION	ı	
3 DIGIT CODE		

NOTE: This information will only be received by Robin Thornburg, Treasurer for the Maize Booster Club.