



**SOUTHERN LEE HIGH SCHOOL 2011-2012
ATHLETIC BOOSTER CLUB & ALL-SPORT PASS APPLICATION**

The **SOUTHERN LEE CAVALIER ATHLETIC BOOSTER CLUB** is a nonprofit volunteer organization whose commitment is to provide the student athletes at Southern Lee High School with the very best facilities, equipment, opportunities, annual scholarship awards and fan support. In order to provide these opportunities to ALL SLHS Varsity and Junior Varsity teams, **WE NEED YOUR HELP.** The **CAVALIER CLUB** is comprised of SLHS parents, teachers, coaches, students, and community business supporters who together raise money each year to support our student athletes. **VOLUNTEERS are crucial to the success of our program.**

**PLEASE CIRCLE ONE OF THE FOLLOWING BOOSTER CLUB COMMITTEES
that you would be interested in helping with and a committee chair will contact you:**

CONCESSIONS	MEMBERSHIP	FUND RAISING
MARKETING	CORPORATE SPONSORSHIP	

MEMBERSHIP PACKAGES INCLUDE: (Please Check One)
 All passes will be valid at any regular season home JV or Varsity game with the exclusion of endowment, powder puff, playoff and tournament games (per NCHSAA rules). All passes include automatic membership in the **CAVALIER ATHLETIC BOOSTER CLUB.**

___ **All Sports Family Pass.....(2) Decals, (1) SLHS Band Booster Restaurant Coupon Card and Parking Pass**
\$200 (2 adults and up to 3 children, \$20 for each additional child)

___ **All Sports Pass.....(1) Decal, SLHS Band Booster Restaurant Coupon Card and Parking Pass**
\$75/Single - \$125/Couple (1 or 2 adults)

___ **All Sports Senior Citizen Pass....(1) Decal, SLHS Band Booster Restaurant Coupon Card and Parking Pass**
\$50/Single - \$75/Couple (62 or older)

___ **All Sports Student Pass.....(1) Decal**
\$40 (Any Student in the Lee County School System)

PRIMARY MEMBER
 NAME: _____
 ADDRESS: _____
 CITY: _____
 ZIP: _____
 PHONE NO.: _____
 EMAIL: _____
 EMAIL: _____
 FAMILY MEMBER #2 NAME: _____
 FAMILY MEMBER #3 NAME: _____
 FAMILY MEMBER #4 NAME: _____
 FAMILY MEMBER #5 NAME: _____
 ADDITIONAL: _____

Official Use Only:

Card #: _____
 Card #: _____
 Card #: _____
 Card #: _____
 Card #: _____
 Card #: _____

(\$20 PER ADDITIONAL CHILD)

Please complete the info above and mail along with your check to: **SLHS Athletic Booster Club**, PO Box 4724, Sanford, NC 27331 Attn: Vince Wenger. Memberships are non-transferable and nonrefundable. A fee of \$10 will be charged for replacement cards and for returned checks. Make checks payable to: **SLHS Athletic Booster Club**