PLEASE TAKE THE TIME TO READ THIS INFORMATION

GSWB 2026/2027
CONCESSION STAND REQUIREMENTS SIGN-OFF

Athlete's Name:_____ Grade:_____

Sport:_____

Parent's Name:_____

Parent's Contact Number:_____ Text OK? YES NO

☐ I acknowledge that I have read and understand the GSWB Concession Stand Requirements. I agree to fulfill my responsibility as the parent of a GSWB athlete.

_____ Date:_____
Parent Signature

*For athletes who participate in multiple sports, please indicate below if you would like your check to roll over to the next sport's season and which sports your athlete intends to participate in.

No, I do not wish to roll my check over to the next sport's season._____

Yes, please roll my check over to the next sport's season._____

☐ Please check this box and sign below if you wish to forfeit your check or cash in the amount of $100.00 and opt out of working the concession stand for the sport season indicated above. Your check or cash will be deposited immediately and a new check will be required for your athlete's next sport season.

_____ Date:_____
Parent Signature