American Leadership Academy
Activity Disclosure Statement for School Sponsored Activities

In accordance with UTAH CODE ANN. 53G-4-409, an activity disclosure statement must be made available to the parents of students in grades 9-12 who are trying out or signing up for any team group, or program that will require the student to miss normal class time or have activities that will take place outside regular school time, including over-night competitions, games performances, events or other activities.

Name of Team _____________________________________________  Are Tryouts Required? Yes ☐ No ☐

Date of Tryouts: ___________________________________  Time of Tryouts:___________________________________________

Maximum number of students who will be involved or selected for the team ________________________ ____________________

Beginning and Ending Dates of the Season:______________________________________________________________

**In Season Activities:** Tentative schedule of events, performances games or other activities which are planned during the time-period or season. Include dates, times and places if available or attach a copy of schedule:

_______________________________________________________________________________ ___________________________

__________________________________________________________________________________________________________

**Out of Season Activities:** Tentative schedule of events, performances, games, camps, clinics, or other activities planned outside of the season including dates, times and places. __________________________________

Individual fees per student _______________________ALA Participation Fee per student ________________________

Total Activity Cost ____________________________
(Charges may not exceed amount listed in fee schedule)

**Itemized Costs:** Attach additional sheet if necessary.

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<th>Item</th>
<th>Description</th>
<th>Fee Amount</th>
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No fee may be charged that has not been previously approved by the Board of Trustees for this activity. Students unable to pay fees may apply for a fee waiver through the school administration.

Employee Responsible for Team/Activity:______________________________________________________________

Phone_______________________________________Email__________________________________________________________

Parent Signature:____________________________________________________________________________________

Approval ____________________________________________     Approval ______________________________________________

Chief Business Administrator             Director