



DOMINION

ACADEMY OF DAYTON

Athletic Family Volunteer Agreement

Date: _____

As a Dominion Academy of Dayton Athletic family we agree to:

Volunteer our required number of volunteer hours in support of the Dominion Academy Athletic Department during the current athletic season. We will help track our volunteer hours. If we cannot donate volunteer hours we agree to pay \$40.00 instead. We will pay by cash or check by the first day of practice for our respective sport(s).

The family of _____ will (initial one):

_____ Volunteer _____ hours during the athletic season.

_____ Pay \$40.00 by cash or check by the first day of practice for our sport(s).

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____ Date: _____

** 4 volunteer hours are required per student athlete, per sport. For example, if you have 2 student athletes playing soccer and 1 playing basketball your total hours are 12.

