

**WAIVER APPLICATION FOR ACTIVITY FEE**

Activity Fee Waivers are based on the availability of funding and are awarded to the families experiencing the greatest level of need. All approved requests are valid for one year only. Applications must be submitted annually.

To request a waiver of the West Chester Area School District Activity Fee, please submit this form along with an explanation of hardship, status of employment, and anticipated duration of hardship to:

Dr. Kalia Reynolds, Assistant Superintendent  
Mail to: 782 Springdale Drive, Exton, PA 19341  
Email application to: [activityfee@wcasd.net](mailto:activityfee@wcasd.net)

**Statement of Hardship:**

I certify that the above information is truthful and accurate. I will notify the Assistant Superintendent if my circumstances change.

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Student(s) Name(s) and School(s) \_\_\_\_\_  
\_\_\_\_\_

A waiver application does not need to be submitted for Free and Reduced Lunch students; these students are automatically eligible.

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