ARCADIA ATHLETICS
ALL SPORTS PASS 2026-27

Complete the form below and make checks payable to:

Arcadia Athletic Department

Please mail completed form and check to:

Arcadia Local Schools Attn: Athletics 19033 SR 12 Arcadia, OH 44804 or return to the school offices in a sealed envelope with 'ATTN: Athletics' on front.

Please print:

NAME _____ E-MAIL _____ PHONE_____
First & Last Name

MAILING ADDRESS _____ _____ _____
House # & Street City, State Zip Code

Select Pass type: (Passes not valid at post-season events or OHSAA tournaments)

☐ **FAMILY PASS** $350.00 ..... Qty. _____ x $350 =_____

Includes general admission for two named parents, and students K-12.

Does NOT include extended family (grandparents, cousins, etc.)

Pass eligible for all HOME athletic events (Varsity – Junior High)

☐ **STUDENT PASS** $100.00 each ..... Qty. _____ x $100.00 = _____

Includes general admission for (1) named Arcadia Schools student K-12, per pass.

Pass eligible for all HOME athletic events (Varsity – Junior High)

☐ **ADULT PASS** $175.00 each ..... Qty. _____ x $175.00 = _____

Includes general admission for (1) named Adult, per pass.

Pass eligible for all HOME athletic events (Varsity – Junior High)

☐ **SENIOR CITIZEN PASS**

- ARCADIA DISTRICT RESIDENT $ FREE..... Qty. _____x $0 = ___*FREE*___

Includes general admission for (1) named senior citizen (Age 62+) resident, per pass.

Pass eligible for all HOME athletic events (Varsity – Junior High)

- NON-RESIDENT $ 85.00 each ..... Qty. _____x $85.00 =_____

Includes general admission for (1) named senior citizen (Age 62+) non-resident, per pass. Pass eligible for all HOME athletic events (Varsity – Junior High)

FOR OFFICE USE ONLY
☐ Check (Check #_____)
☐ Cash

TOTAL = $ _____

Family Pass:

Named Parents (2)

_____ _____

First & Last Name First & Last Name

Arcadia K-12 Students

_____ _____

First & Last Name & Grade First & Last Name & Grade

_____ _____

First & Last Name & Grade First & Last Name & Grade

_____ _____

First & Last Name & Grade First & Last Name & Grade

Student Pass:

Arcadia K-12 Students

_____ _____

First & Last Name & Grade First & Last Name & Grade

_____ _____

First & Last Name & Grade First & Last Name & Grade

Senior Citizen Pass:

Senior Citizen(s)

_____ _____

First and Last Name First and Last Name

Please contact Arcadia Athletic Department with any questions,
call (419)-894-6431 option #7 or email kuhnk@arcadiaschools.org