

*Utah law and Utah High School Activities Association require development of an Activity Disclosure for school-sponsored groups or programs in grade 9 through 12 involving contest, performance, events, or other activities which require students to miss class time or take place outside of the regular school day. A copy of this disclosure must be provided to both students and parents.  
(Utah Code § 53G-4-409 and UHSAA Joint Statement, Required Standard 1)*

School Layton High School

Name of Team Swim Team Boys

Are tryouts required? ☒ Yes ☐ No

When and where will tryouts be held?

Maximum number of students who will be involved or selected to participate

50

09/26-30 Layton

Beginning and Ending Dates of Season September 2022- February 2022

**In-Season Activities:**

Tentative schedule of events, performances, games, or other activities which are planned during the time-period or season associated with the group including dates, times, and places if available or attach a copy of schedule.

Season schedule attached.

**Out of Season Activities:**

Tentative schedule of events, performances, games, camps, clinics, or other activities which are planned outside of the activity season including dates, times, and places.

Awards Banquet- February 2023 @ LHS

Individual Fees/Costs per Student for Participation  
Charges may not exceed amount listed in fee schedule.

\$170

No fee may be charged in connection with any school sponsored activity unless the fee has been approved by the local board. Students unable to pay fees may seek a fee waiver through the school administration.

Item	Description	Fee Amount	Principal Approval	Director Approval
Participation Fee	Participation Fee	\$70	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Transportation Fee	Transportation Fee	\$20	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Drug Fee	Drug Fee	\$5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Apparel	Boys brief or jammer swimsuit (\$45) Swim Cap (\$20)	\$65	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Off Campus Clinic	Thanksgiving Invitational Meet Fees	\$10	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
		\$	<input type="checkbox"/>	<input type="checkbox"/>

Add items as outlined in maximum fee amounts of the District fee schedule with a description and each fee amount.  
Attach additional sheet if necessary

Employee Responsible for Activity: Jason Udy

Phone 8017251217 E-mail judy@dsdmail.net

Principal Signature: [Signature]

Director Signature: [Signature]