



**LEDYARD ATHLETIC BOOSTER CLUB  
P.O. Box 291  
LEDYARD, CT 06339**

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*"Keeping Sports Alive at Ledyard High"*

2017-2018 Membership

Dear Parents/Guardians,

The Ledyard High School Athletic Booster Club (LABC) needs your support. The sole purpose of the LABC is to support all Ledyard High School student athletes. We do this through various fundraisers and membership dues. Your annual dues help fund coaches' requests and athlete recognition. Your membership includes an Athletic Booster Club card, which entitles you and your immediate family members to \$1.00 off each ticket for each regular season home athletic event – excluding ECC events. Membership also includes a scholarship opportunity for your Student Athlete in their senior year.

Over the past five years, the LABC has purchased over **\$50,000** in equipment for our high school sports teams. The requests that were fulfilled have ranged from full team uniforms, to team warm ups, to practice equipment, and even scoreboards. All coaches are invited and are encouraged to bring requests to the LABC.

In addition, each year we also fund two (**\$1000**) college scholarships that are awarded each spring to one male and one female student athlete.

All of this is funded through concession stand sales, donations and membership dues.

**We need your help.** With rising costs and reduced sports budgets, we need more members and active participation in order to be able to continue to support LHS athletes and team needs. You can help by becoming a **Booster Club Member**.

Our goal is to continue to make this organization a vital part of the Ledyard High School athletic program. All members are encouraged to attend our monthly meetings. During these meetings we review coaches funding requests, discuss improvement projects for the athletic facilities, and solicit new ideas to help athletics at Ledyard High School. We look forward to seeing you at the meetings and at the LHS sporting events. **Your input and participation matters!**

Please complete this form and send it along with your payment to the address listed above. Please make checks payable to LABC.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Does your phone accept text messages? \_\_\_\_\_

E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_

Membership Level: \_\_\_\_\_

**List names and grade level of children enrolled at LHS:**

Child 1: \_\_\_\_\_ Grade \_\_\_\_\_ Sports Played: \_\_\_\_\_

Child 2: \_\_\_\_\_ Grade \_\_\_\_\_ Sports Played: \_\_\_\_\_

Child 3: \_\_\_\_\_ Grade \_\_\_\_\_ Sports Played: \_\_\_\_\_

Child 4: \_\_\_\_\_ Grade \_\_\_\_\_ Sports Played: \_\_\_\_\_