Pleasant Schools Drug Testing Registration

Date of Initial Drug Test **August 6, 2026**

Forms will be available on test day as well as in the HS office. Please have form filled out and ready with payment when registering.

Parent/Guardian (please print) _____

Student #1 (please print)_____Grade___

Payment Information

High School Pay to Participate ($75)	_____
Middle School Pay to Participate ($50)	_____
Drug Testing Fee ($35)	_____
Parking Pass ($5)	_____
Student #1 TOTAL	_____

Student #2 (please print)_____Grade___

Payment Information

High School Pay to Participate ($75)	_____
Middle School Pay to Participate ($50)	_____
Drug Testing Fee ($35)	_____
Parking Pass ($5)	_____
Student #2 TOTAL	_____

_____ My family will meet the Family **Pay to Participate** Cap of $150 and therefore will not need to pay the Pay to Participate fee for the student(s) listed below.

Student #3 (please print)_____Grade___

Payment Information

High School Pay to Participate ($75)	__N/A___
Middle School Pay to Participate ($50)	__N/A___
Drug Testing Fee ($35)	_____
Parking Pass ($5)	_____
Student #3 TOTAL	_____

Student #4 (please print)_____Grade___

Payment Information

High School Pay to Participate ($75)	__N/A___
Middle School Pay to Participate ($50)	__N/A___
Drug Testing Fee ($35)	_____
Parking Pass ($5)	_____
Student #4 TOTAL	_____

To be completed by office staff

Total Amount Paid _____

Check # _____ Name on Check _____

Cash _____ Form Completed by _____