



2026-2027 Athletic Pass Order Form

Name: _____

Email: _____

Phone Number: _____

Address: _____

Individual Pass

Please mark the quantity of passes you would like to purchase on the left side.

_____ Big Bucc Pass (Good for 1 Individual) **\$125.00 each**

Name: _____

_____ Adult Fall Sports Pass (Good for 1 Individual) **\$80.00 each**

Name: _____

_____ Student/Senior Citizen (65+) Fall Sport Pass (Good for 1 Individual) **\$40.00 each**

Name: _____

_____ Adult Winter Sports Pass (Good for 1 Individual) **\$90.00 each**

Name: _____

_____ Student/Senior Citizen (65+) Winter Sport Pass (Good for 1 Individual) **\$55.00 each**

Name: _____

Senior Citizen Pass (Residents of the Covington School District, Age 65+)

_____ Senior Citizen Pass (Good for 1 Individual – Name on Card Only)

Name: _____

Reserved Seats (Varsity Football Only)

Please indicate the number of seats you would like to purchase.

Reserved Seats (Boys' Basketball Only)

Please indicate the number of seats you would like to purchase.

Total Payment:

Total: _____

MAKE CHECKS PAYABLE TO: COVINGTON ATHLETIC DEPARTMENT

Order Forms and Payments should be mailed to:

Covington Athletic Department

Attn: Athletic Director

807 Chestnut Street

Covington, OH 45318