Снес	CLIST FOR <b>7</b> <sup>TH</sup> G	GRADE STUD	ENTS'			
PARTICIPATING IN SPRING VOLLEYBALL EVALUATION						
School Name: School's Attendance Zone:						
Student's Name:		Date of Birth:		Last Four SSN:		
1. Dogg the above parced student reside		latia attandana		1	Vaa	No
<ol> <li>Does the above-named student reside in your school's athletic attendance zone?</li> <li>If no, did student attend the entire 7<sup>th</sup> grade at a traditional middle/junior high school that was located in your athletic attendance zone?</li> </ol>					Yes Yes	No No
3. What was the name of the middle/junion		tudent attende	d?			
4. Has this student been pre-enrolled in your school, i.e., has the student completed your school's application process and been officially accepted into your school?					Yes	No
5. Has this student's parents been informed that once the student participates in one session of spring practice at your school that your school shall become the student's school of eligibility and any subsequent transfer to another LHSAA member school without a corresponding bona fide change of residence and shall cause the student to become ineligible until the student has attended your school for one calendar?					Yes	No
6. Have you registered the student on the LHSAA's Members' Only website?					Yes	No
7. Does the student meet all other LHSAA rules and regulation as it relates to eligibility?					Yes	No
8. Do you have a student folder for this student that includes a properly completed and signed parental permission form, athletic participation form, substance abuse/misuse contract, medical history evaluation, and current medication examination?					Yes	No
9. Do you have documentation that student is covered by catastrophic insurance?  Output  Description:					Yes	No
Contract R	EGARDING STU	JDENT'S EL	IGIBILITY			
I, principal of the above-named school, hav the student participates in one volleyball spi of eligibility and that a transfer to any oth residence shall render her ineligible until he	ing evaluation sessi er LHSAA member	ion with my scl school withou	nool, my school s t a correspondin	hall bed	come her	school
SIGNED: DATE:						
PF	INCIPAL					
I,	, parent(s) or	guardian, of th	ne above-named	student	t, underst	and that
I,	ring volleyball evalu	uation session o	of Jear Her narticir	nation i	High	School,

evaluation makes \_\_\_\_\_ High School her school of first choice for eligibility purposes.

that school for one calendar year unless a permanent bona fide change of residence takes place.

**PARENT/GUARDIAN** 

that she shall be ineligible to participate in any sport at any level at all LHSAA member schools until she has attended

High School when the 2019-2020 school year begins, I understand

DATE:

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SIGNED:

If she does not attend \_