

LEGAL NAME \_\_\_\_\_  
 (Please Print)      **LAST**                      **FIRST**                      **M.I.**

(2011-2012) GRADE 9    10    11    12  
 (Circle one)  
 M       F  

SPORT: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

*\*\*If you are a Home School student, please contact Clyde Metcalf, 941-955-0181, ext 64589  
 3 weeks PRIOR to the start of your season.*

<b>OFFICE USE ONLY</b>	<p style="text-align: right;"><b>PHYSICAL DATE:</b> _____</p> <p style="text-align: right;"><b>BIRTH CERTIFICATE:</b>    Y    N</p> <p><b>INSURANCE:</b>    School    Personal    Football (Circle One)</p> <p><b>SCHOOL:</b>    SHS    PV    SMA    HOME    PHOENIX</p> <p style="text-align: right;">OAK PARK    POLYTECH (Circle One)</p>
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TEAM: SAILORS  
 COLORS: Orange & Black

Before participating in Athletics at SHS, the attached forms need to be *completed and returned to the coach.*

- FHSAA Physical Form
- Parent Permission Form
- Insurance is required to try-out and play.**  
 Name and policy number of Insurance company covering participant.  
*You may purchase insurance through the school.*
- Copy of Birth Certificate (first time participants)
- Notarized** Medical Release Form for Out-of-County/Overnight Travel
- HIPAA
- Standards for Participation Contract

