Student Name:

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This form is to be completed by all students entering a sport school / sport academy, where the student does not live within the school board designated boundaries. Completed forms must be submitted to the YRAA Coordinator of Athletics through the school Athletic Designate by the 15th of September for grade 9 students or within 15 days of attending the sport school/sport academy for transfer students.

Gender:

Ontario Education Number:		Date of Birth:	Home Phone:	
Home Address:	Street Address	City / Town	Postal Code	
School attended prev	ious year:	Name		
Previous School Address:		City / Town	Postal Code	
	chool to your home:			
Sport of Focus / Specialization	Highest Level of Competition (eg. Tier/Division, Regional, Provincial, National)	Club Affiliation & Team (Include phone # or e-mail of contact p		
List all other sports played outside of school in the previous 12 months.				
Sport (For Track and Field list events)	Level of Competition (eg. Tier/Division, Regional, Provincial, National)	Club Affiliation & Team (Include phone # or e-mail of contact p		
 Students submitting 		 hts to participate in interschool spo formation will appear before a Bo		
Student Signature			Parent/Guardian Signature	
School Athletic Director Signature			Principal Signature	