



This form is to be completed each year by all students entering or continuing in an HPA/Co-op program or Intensive Sport Program at a YRAA member school. The form, when completed, is to be signed by the student, parent/guardian, program representative/teacher, and the school principal. Three copies of this form should be made, copy one to be sent to the YRAA Office, copy two should be kept in the guidance office kept in the school guidance office, and copy three is kept by the HPA/Intensive Sport Program teacher advisor.

Student Name: _____ Gender: F __ M __ NB __

Home Address: _____ Current Grade: _____
Street address

City/town Postal code Phone: _____

Sport of Focus/Specialization	Level of Competition <small>(eg. Tier/Division, Regional, Provincial, National)</small>	Club Affiliation & Team Name <small>(Include phone # or e-mail of contact person)</small>

List all other sports played at club or community.

Sport	Level of Competition <small>(eg. Tier/Division, Regional, Provincial, National)</small>	Club Affiliation & Team Name <small>(Include phone # or e-mail of contact person)</small>

Student Signature

Parent/Guardian Signature

HPA/Intensive Sport Program Teacher Advisor

Principal Signature

Notes: This completed form is required for students to participate in interschool sport.
• Students submitting falsified information on this form will appear before a Board of Reference and may lose their eligibility to play interschool sport.