



**NON ENROLLED STUDENT-ATHLETE
VERIFICATION FORM**

2018-2019 SCHOOL YEAR

STUDENT INFORMATION

Student's Name: _____

Student's Current Grade Level: _____ Current School: _____

Male Female Special Education: Yes No

Student's Date of Birth: _____

Student's Home Address: _____
No. Street Apt. Zip Code

Parent/Guardian Name: _____

Home Phone: _____ Cell / Work Phone: _____

Based on your current address, your school athletic participation assignment is

(Completed by Athletic Office)

AFFIDAVIT

State of Ohio)
) SS:
County of Montgomery)

I, _____, parent/guardian of _____, do hereby certify that the above information is accurate and true.

Parent/Guardian Signature: _____ Date: _____

Sworn to me this _____ day of _____, 20____.

Notary Public

PLEASE NOTE: Participation in athletics and extracurricular activities is governed by Dayton Board of Education policies and procedures.