



BC SCHOOL SPORTS

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Membership Application Form 2011-2012

School (Full Name): _____

Address and City: _____ Postal Code _____

School Phone: _____ School Fax: _____ Athletic Association: _____

School Webpage Address: _____ General School E-Mail: _____

School Colours: _____ School Team Nickname: _____

Principal Name: _____ Principal E-mail: _____

Athletic Director Name: _____ Athletic Director E-mail: _____

Direct Athletic Department Phone: _____

School Grades and Enrollment: C7.1 Number Calculation for all Tier Classifications:

The tier designation count should include all students under (19) years of age as of December 31st of the current school year. These numbers should be the same count of students that are entered to the Ministry of Education on September 30 of the current year. (Note that Tier Classification is based upon the actual number of students in a building rather than a count of only eligible students.) (May, 2011)

Grades	8	9	10	11	12	Total
Boys	_____	_____	_____	_____	_____	_____
Girls	_____	_____	_____	_____	_____	_____
Total	_____	_____	_____	_____	_____	_____

For Alternate, Feeder and Distanced Ed schools only – Which school are the students playing up to?: _____
and for which sports teams: _____

If a school is a member of a BCSS Recognized Athletic Association, they must also be a member of BC SCHOOL SPORTS (BCSS) Bylaw 13.2.3).

BC SCHOOL SPORTS recognizes that the Administrative Head of each school is held ultimately responsible in all matters in his/her school which concern interscholastic athletic contests. The requirement of membership in BC SCHOOL SPORTS is that Principals will ensure that policies established by BCSS Member Schools for interscholastic athletic competition will be followed by the administration, coaches and student-athletes of this school.

Principal Name (print)

Signature

Date

Athletic Director Name (print)

Signature

Date

Return completed form via Fax: 604-477-1484

FOR OFFICE USE ONLY

Date Received: _____ Approved: _____ Fees paid: () yes () no