## 2021-22 Distributed Learning & Alternate School Students



Distributed Learning & Alternate School student-athletes may compete in BCSS competition provided that they meet all the criteria as outlined in section 822.0

Please email completed form and a copy of the students Personal Record Card to info@bcschoolsports.ca

## PARENT/STUDENT SECTION

| Student Name: (First and Last):  |                    |   |
|--|--------------------|---|
| Date of Birth (YYYY-MM-DD):  |                    |   |
| Current School:  |                    |   |
| Student's current home address:  |                    |   |
| The school that the student was last registered for as a ful               | I-time student: or | ٢ |
| The student's catchment area school:                                       |                    |   |
| Team(s) this student wishes to play for:<br>e.g. "Senior Girls Basketball" |                    |   |
| Parent/ Legal Guardian Signature:  |                    |   |
|  |                    |   |

## **SCHOOL SECTION**

| Current School Athletic Director Name:   | Signature: |
|--|------------|
| Current School Administrator Name:       | Signature: |
| Receiving School Athletic Director Name: | Signature: |
| Receiving School Administrator Name:     | Signature: |