

**PRIVATE SCHOOL STUDENT APPLICATION FOR PARTICIPATION IN
WELLS-OGUNQUIT CSD CO-CURRICULAR ACTIVITIES**

The parent (or student if 18 years of age or older) must submit a separate application for each activity in which participation is desired.

STUDENT INFORMATION

Student's Name:

Student's Date of Birth:

Grade in Private School:

Student's Address:

Phone Number:

Parent/Guardian's Name:

Private School Name:

Private School Address:

Private School Phone Number:

Private School Principal/Head's Name:

Student is Applying for Participation in the Following Activity: _____

VERIFICATION OF ELIGIBILITY

I authorize _____ (name of Private School) to provide to Wells-Ogunquit CSD upon its request all information necessary to verify that my son/daughter, _____ meets the eligibility requirements for participation in the co-curricular activity that is the subject of this application.

Parent's Signature (or Student's, if 18 or older)

Date

Printed Name

STUDENT PARTICIPATION AGREEMENT

I agree to comply with all Wells-Ogunquit CSD policies, administrative procedures, and behavioral, disciplinary, attendance and other rules that apply to Wells-Ogunquit CSD students participating in the co-curricular activity that is the subject of this application.

Student's Signature

Date

Printed Name

Adopted by the Wells-Ogunquit C.S.D. School Committee:

02/01/12