



# DERBY HIGH SCHOOL

Department of Athletics

---

## Student Participation

Complete Legal Name: \_\_\_\_\_  
(First) (Mid dle) (Last)

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

This application to participate in athletics at Derby High School is considered a privilege and voluntary on my part and is made with the understanding that I will abide by all the eligibility rules set up by the Derby High School Athletic Department and the Connecticut Interscholastic Athletic Association. (Please get a copy of the student's right of due process from your coach.)

Signature of Athlete: \_\_\_\_\_ Date: \_\_\_\_\_

## Parent Consent

I hereby give my consent for the above student to engage in interscholastic athletics at Derby High/Middle School in the Derby High/Middle School Athletic Department approved sports during the current school year and to accompany the team as a member on its out-of-town trips. I understand that my son/daughter will be expected to adhere firmly to all established athletic policies. I have read both the Derby High/Middle Athletic Code and the eligibility rules.

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_