North Kitsap School District

A Great Place to Live & Learn

Athletic Registration Form 2015-16

Section I: Information

Student name (print legibly)_____
(Last) (First) (Middle Initial)

☐Male ☐Female Grade in Sept 2015____Date of Birth:_____Sport(s):_____

Address:_____City: _____Zip Code:_____

Mother's name: _____Home Phone_____Bus/Cell. Ph_____

Father's name: _____ Home Phone:_____Bus/Cell. Ph:_____

Parent e-mail: _____Date of enrollment in NKSD: _____

School attended last year ☐ KHS ☐ NKHS ☐KMS ☐PMS ☐Other_____

Are you a transfer student?	☐Yes	☐No		
Were you under any conditions of ineligibility when you left your previous school?			☐Yes	☐No
Are you a foreign exchange student?	☐Yes	☐No		
Are you being home schooled?	☐Yes	☐No	Date of registration at your school:_____	
Are you a Running Start student?	☐Yes	☐No		
How many credits are you taking?	_____			
Are you a Parent Assisted Learning (PAL) student?		☐Yes	☐No	
Counseling Office notified:	☐Yes	☐No		
Are you a 5th year student?	☐Yes	☐No		

Section II: Student Handbook

Signing confirms that we have read and agree to abide by the contents of the NKSD Student Athletic Handbook. I/we are aware that by signing this Athletic Registration, I/we are acknowledging notification of the code of conduct which is applicable throughout attendance in the NKSD and not solely for the sport season. **(Handbook is available upon registration and/or on the NKSD website.)**

Student-athlete signature: _____Date:_____

Parent/Guardian signature: _____Date:_____

Section III: Concussion and Sudden Cardiac Arrest Information

Signing confirms that we have read and are aware of what concussions and sudden cardiac arrest are, the signs and symptoms of a concussion and sudden cardiac arrest, and what you should do if your student-athlete receives a concussion or goes into sudden cardiac arrest.

Student-athlete's signature: _____Date:_____

Parent/Guardian signature: _____Date:_____