Albuquerque Public Schools

High School/Middle School-Athletic/Extra Curricular

*Participation Form*

*PLEASE PRINT CLEARLY*

LAST NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FIRST NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_MI: \_\_\_ SEX: M🞏 F🞏

STUDENT ID# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CURRENT GRADE: \_\_\_\_\_\_\_\_ DATE OF BIRTH: \_\_\_\_ - \_\_\_\_- \_\_\_\_

STUDENT E-MAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HOME PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

YEAR ENROLLED IN 9TH GRADE \_\_\_\_\_\_ SCHOOLS ATTENDED LAST YEAR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP CODE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT/GUARDIAN INFORMATION:

Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_

 Gender

Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_

 Gender

EMERGENCY CONTACT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ RELATIONSHIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **SCHOOL NAME:** |  **ATHLETIC** 🞏 **EXTRA CURRICULAR** 🞏 |
| * Our choice to be involved as a participant, parent, and/or spectator means that we agree to be bound by the terms, conditions rules and standards of the NMAA, APS and current High School.
 | * In watching the NMAA DVD presentation, and hearing the athletic department presentation I understand the expectation and responsibilities of an athlete, parent and spectator regarding privilege of the athletic participation at the interscholastic level
 |
| Please Check Appropriate Box🞏 I AM TAKING \_\_\_\_\_\_\_NUMBER OF CLASSES (six classes or more)🞏 I AM A PART TIME STUDENT (number of classes \_\_\_\_\_)🞏 I AM ENROLLED IN A CHARTER SCHOOL (NAME OF CHARTER SCHOOL) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_🞏 I PRESENTLY LIVE IN THE APS DISTRICT AREA WITH: 🞏PARENT/GUARDIAN 🞏OTHER🞏 I AM ON APPROVED TRANSFER/ DATE APPROVED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_🞏 I AM HOME SCHOOLED\*\*\* |
| PARTICIPATION HISTORY (Please mark all levels) |
| FALL | 9th | 10th  | 11th | 12th | WINTER | 9TH | 10TH  | 11TH | 12TH | SPRING | 9TH | 10TH  | 11TH  | 12TH |
| CROSS COUNTRY |  |  |  |  | BASKETBALL |  |  |  |  | BASEBALL |  |  |  |  |
| FOOTBALL |  |  |  |  | SWIM/DIVING |  |  |  |  | GOLF |  |  |  |  |
| SOCCER |  |  |  |  | WRESTLING |  |  |  |  | SOFTBALL |  |  |  |  |
| VOLLEYBALL |  |  |  |  | CHEERLEADING |  |  |  |  | TENNIS |  |  |  |  |
|  |  |  |  |  | DANCE |  |  |  |  | TRACK/FIELD |  |  |  |  |

CO-CURRICULA

*Please Check Appropriate Box(es)*

🞏Athletic Training Challenge

🞏Bowling

🞏Business Pros of America

🞏Chess

🞏Choir

🞏Concert Band

🞏DECA Marketing Education

🞏Drama/One Act Play

🞏English Expo

🞏FCLA (Family, Career & Community Leaders of America)

🞏FFA Agriculture Education

🞏HOSA (Health Occupations Student Assoc) 🞏JROTC

🞏Mock Trial

🞏Rodeo

🞏Scholastic Publication

🞏Science Fair

|  |
| --- |
| DATE: \_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Parent/Guardian |

White Copy – Student Services Pink Copy – Athletic Director Green Copy – Activities Director Yellow – Principal