



PLAYER'S RECORD CARD

CHICAGO PUBLIC SCHOOLS ATHLETIC ASSOCIATION

PUPIL'S NAME _____

The information submitted is correct and I hereby give my permission for my son/daughter _____

to engage in _____ and assume all responsibility for injuries he/she may receive while practicing and going to and returning from or playing the game. Date of Birth _____

I understand that all property belonging to the school shall be returned on demand and I agree to pay for same if lost or stolen.

Signature of Father or Mother or Guardian _____

Home Phone _____ Home Address _____

I have represented a high school in athletics _____ years previous to this school year and am an amateur, (Art. 2 Sec. 3a. Chicago Public High School Athletic Association By-Laws: "He/she shall be an amateur, one who has never used, and is not using, his/her knowledge or his/her athletic skill for money. He/she shall have not have played on any team on which there are paid players.")

I will not represent any other organizations in the same sport while a member of the school team.

Date _____ Signature of Student _____

Address of student _____

SCHOOL RECORD

SPORT _____

SCHOOL _____ ROOM _____ DIV. TEACHER _____

NAME _____ ADDRESS _____

(First) (Middle) (Last) (ID Number)

1. Date of birth _____ Place of birth _____
(Month) (Day) (Year) (City) (County) (State)

Proof submitted and placed on file: (a) Birth _____ (b) Bapt. _____ (c) Elem. School Record _____

2. Date of enrollment this semester _____
(Month) (Day) (Year)

3. Number of semesters in attendance in high schools including the present semester _____

4. Number of seasons of participation in this sport, including this season _____

5. First elementary school attended _____

Date of entering _____ Date of leaving _____
(Month) (Day) (Year) (Month) (Day) (Year) (City) (State)

6. Graduated from _____ Elementary school _____

Date of entering _____ Date of leaving _____
(Month) (Day) (Year) (Month) (Day) (Year) (City) (State)

7. Other junior or senior high schools attended _____

Date of entering _____ Date of leaving _____
(Month) (Day) (Year) (Month) (Day) (Year)

8. Date of original enrollment in this high school _____

(Month) (Day) (Year)

(Date) (Signature of board control member)