This form is to be completed each year by all students entering or continuing at a sport school/sport academy/sport specialist program.

Completed forms must be submitted to the OFSAA Representative, through the school Athletic Designate or PHE Department Head by the 15th of September for grade 9 students or within 15 days of attending the sport school/sport academy for transfer students.

Student Name:	Gender:	
Ontario Education Number:	Date of Birth:	
		DD /MM/YY
Home Phone:	Cell Phone:	
Home Address:		
Street Address		
	<i>-</i>	
City / Town/ Province	Postal Code	

School History (state years)	Street Address	City/Town/Province/ Postal Code	Phone Number
Current School and School Board			
Previous School and School Board(s)			
Closest School and School Board to home address			

Sport of Focus / Specialization	Highest Level of Competition (eg. Tier/Division, Regional, Provincial, National)	Club Affiliation & Team Name (Include phone # or e-mail of contact person)	Hours of Training & Competitions per Week	
	List all other sports playe	d outside of school in the previous 12 mo	nths.	
Sport (For Track and Field list events)	Level of Competition (eg. Tier/Division, Regional, Provincial, National)	Club Affiliation & Team Name (Include phone # or e-mail of contact person)	Hours of Training & Competitions per Week	
•	g inaccurate or misleading in	ts to participate in interschool sport. formation will appear before a Board of Refer	ence and may lose their	
<u> </u>	·			
Student Signature		Parent/Guardian Sig	Parent/Guardian Signature	
 School Athletic Director Signature		Principal Signature		

Personal information is collected pursuant to the Education Act and will be used to determine eligibility for interschool sport. Information will be retained for four years from the date of last use. For more information, contact the LOSSA Secretary.