

**PRIVATE SCHOOL STUDENT APPLICATION FOR PARTICIPATION IN THE  
BIDDEFORD SCHOOL DISTRICT COCURRICULAR ACTIVITIES**

The parent (or student if 18 years of age or older) must submit a separate application for each activity in which participation is desired.

**STUDENT INFORMATION**

Student's Name:

Student's Date of Birth:

Grade in Private School:

Student's Address:

Phone Number:

Parent/Guardian's Name:

Private School Name:

Private School Address:

Private School Phone Number:

Private School Principal/Head's Name:

Student is Applying for Participation in the Following Activity: \_\_\_\_\_

**VERIFICATION OF ELIGIBILITY**

I authorize \_\_\_\_\_ to provide to the Biddeford School District upon  
**[Private school name]**

its request all information necessary to verify that my son/daughter, \_\_\_\_\_  
**[Student's name]**

meets the eligibility requirements for participation in the co-curricular activity that is the subject of this application.

\_\_\_\_\_  
Parent's Signature (or Student's, if 18 or older)

\_\_\_\_\_  
Date

**STUDENT PARTICIPATION AGREEMENT**

I agree to comply with all the Biddeford School District policies, administrative procedures, and behavioral, disciplinary, attendance and other rules that apply to the Biddeford School District students participating in the co-curricular activity that is the subject of this application.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

Adopted: November 22, 2011