

Sumner School District #320 –Activity Eligibility Form

Minimum academic requirement to participate
2.0 GPA and passing all classes.

Student Name (Last) _____ (First) _____ (MI) _____ Male ___ Female ___

Address _____ City _____ Zip _____

Birth Date _____ Phone _____ School Attending _____ Grade _____

List Activities (Middle School, High School or Both):

1. _____ 3. _____
2. _____ All School Activities (check here) _____

1. Student Signature: (Please read carefully before signing below.)

- I declare that all of the above information is true and correct.
- I have read, signed, agreed to abide by, and have in my possession, the Code of Conduct Training Rules.

Student Signature _____ Date _____

2. Parent Signature & Student Information/Participant Photo Release: (Please read carefully before signing below)

- I declare that all of the above information is true and correct.
- I have read, signed, agreed to abide by, and have in my possession, the Code of Conduct Training Rules.
- I hereby give my permission for the above-named student to participate in the activities listed above for the 20__ / 20 __ school year. I understand my son/daughter has chosen to participate in a Sumner School District activities program, which could lead to serious injury or death. I understand the risks and acknowledge the potential for serious injury or death to occur to my son/daughter.
- I hereby grant permission for my child named above, to appear in photographs taken at school or during school activities, events and functions. I understand that the school district will retain copyright of these photographs, and any and all rights to the photographs in this and any future district publications, in any format or media. This release also extends to the use of my child's photograph on the district website.
- I further acknowledge and give consent that my child may be included in television or newspaper articles, photographs or film by local or regional news bureaus. I understand that the news agency will retain copyright of these photographs and interviews including any and all rights to the photographs or interviews in this and any future publications, in any format or media.
- I further give consent to allow the release of my child's free/reduced lunch status to the school.

Parent Signature _____ Date _____