



Valley High School Football Information

Last Name: _____ First Name: _____ MI: _____

Upcoming Grade: _____ Student ID: _____ Sex: M / F

Date of Birth: ____/____/____ City: _____ State: _____

Date Entered 9th Grade (Mo/Yr): ____/____ Date Enrolled This Semester (Mo/Yr): ____/____

School Attended Last Year: _____ Other Sports: _____

Parents/Guardians Names: _____

Present Home Address: _____

Home Phone #: _____ Cell #: _____ Work #: _____

Email Address: _____

Please Check One:

_____ I presently live in Valley's attendance area with my legal parent or guardian.

_____ I do not live in Valley's attendance district. (If you checked this line you are required to have a current APS approved transfer on file at VHS in order to be eligible for athletic participation.)

DISCLOSURE STATEMENT: I agree that all of the above information is true and accurate. If anything on this form changes, I realize that it is my responsibility to inform VHS, my Coach, and Athletic Director IMMEDIATELY.

Student Printed Name

Student Signature

Parent Signature

Date