

# MOUNT ANTHONY UNION DISTRICT 14

ATHLETIC DEPARTMENT

301 Park St. Extension

Bennington, Vermont 05201

## SWIM TEAM "MEMBER TO MEMBER" APPLICATION REQUEST FORM

The student listed below is not enrolled at Mt. Anthony Union Middle/High School for the \_\_\_\_\_ school year, but wishes to participate on the MAU Swim Team.

The student:

- a. Is enrolled in a school sanctioned by the Vermont Principals Association, outside of the SVSU district.
- b. Has proof of health insurance (Attach copy of insurance card or bill).
- c. Will comply with all general VPA eligibility requirements.
- d. Will comply with all Mt. Anthony academic and eligibility requirements.
- e. Will comply with all school policies regarding training rules and behavior.
- f. Completes physical examination and turns in MAU physical/participation form to coach at first practice (must have physician's signature).
- g. Submit check or money order made payable to MAU District 14 for \$137.00 to cover expenses for participation on swim team.

### APPLICATION:

Name of Student: \_\_\_\_\_ Date: \_\_\_\_\_

School Attending: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of Parent/guardian of student: \_\_\_\_\_

Mailing Address of Student: \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Name of Health Insurance: \_\_\_\_\_ Policy #: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Receiving Principal's Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Sending Principal's Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Mail this completed form with proof of health insurance to:

Tim Brown, Activities Director, Mt. Anthony Union High School, 301 Park Street, Bennington, VT 05201