



## Sickles High School

### JV and Varsity Sports Participation Waiver

Student Name (Last, First): \_\_\_\_\_

Sport (s) participated in: \_\_\_\_\_

Years participated: \_\_\_\_\_

The above student has participated for 2 years in a JV or Varsity sport(s). This has been verified by the coach and APA.

Coach's signature \_\_\_\_\_

Date \_\_\_\_\_

APA's signature \_\_\_\_\_

Date \_\_\_\_\_

