S.O.S.S.A.
PLAYER ELIGIBILITY LIST

School:_____

Sport: _____

Level of Competition: ☐ **Female** ☐ **Male** ☐ **Junior** ☐ **Senior**

Classification: ☐ **A** ☐ **AA** ☐ **AAA** ☐ **AAAA**

NAME	Age			No. Courses		Transfer Student?	Year Stud. Enter Gr. 9	Uniform Number
	Yr	Month	DAY	Sem I	Sem.II			

The above named students are eligible for competition in accordance with the rules and regulations as specified in the S.O.S.S.A. constitution.

Date: _____

_____	_____	_____
Principal	**Athletic Liason Person or Sports Co-ordinator**	**Coach**

Names must be typed. Additions not typed must be signed by the Principal