

**ELIDA HIGH SCHOOL
SAME-SEASON TWO-SPORT PARTICIPATION
AGREEMENT FORM**

SCHOOL YEAR _____

NAME: _____ DATE: _____ GRADE: _____

SPORT #1 _____

SPORT #2 _____

SPORT #1 HEAD COACH SIGNATURE

DATE

SPORT #2 HEAD COACH SIGNATURE

DATE

ATHLETIC DIRECTOR SIGNATURE

DATE

PARENT SIGNATURE

DATE

This form must be signed by all of the above.

**This form will be kept on file in the Athletic Office, with all parties
involved receiving a copy.**