

DCSAA MEMBERSHIP APPLICATION

Through this application, the

School applies for membership in

the District of Columbia State Athletics Association for the 20____- 20____school year. Membership in the DCSAA is voluntary with the exception of D.C. Public Schools, which are required to be members by law.

School Information

| Name of School | |
|--------------------------------|--|
| School Address | |
| City, State, ZipCode | |
| Administrative Head of School | |
| Principal Phone Number | |
| Principal Email | |
| Athletic Director of School | |
| Athletic Director Phone Number | |
| Athletic Director Email | |

Signatures of Agreement

Signatures of the Principal of School and the Athletic Director represent an agreement that the member school, and its officials, certify that its student-athletes meet the requirements as prescribed in the Act, Rules & Handbook regarding:

- 1. Age, Semester and Grade Level
- 2. Residency
- 4. Health & Fitness

Softball

Tennis B G

Ultimate Frisbee

3. Academics

5. Attendance

Declaration of Sports

Please Check Each Sport that you will compete in for a DCSAA Championship:

- Baseball
- □ Football

Indoor Track B G

Outdoor Track B G

- □ Basketball B_G
- Cheerleading
- □ Chess □ Wrestling
- $\Box \quad \text{Soccer} \underline{B} \underline{G}$ $\Box \quad \text{Golf}$
- \Box Cross Country <u>B</u> G

□ Volleyball □ Lacrosse_B_G Swim & Dive B G

(Signature of Administrative Head of School)

(Signature of Athletic Director)



1050 First Street NE, Sixth Floor, Washington, DC 20008 District of Columbia State Athletics Association Kenneth Owens, Statewide Director of Athletics Kenneth.owens@dc.gov