HEB ISD Homeschool Athletics Participation Form

I have read and understand the district's guidelines on home school student's participation in UIL activities. I agree to abide by all the rules and regulations set forth in this agreement. *

Student Full Name	**Student Grade Level**
Student Date of Birth	**Gender**
Home Campus	**School Year**
Parent/Guardian Full Name**	**Date**
Parent/Guardian Full Name	**Parent/Guardian Phone Number**
Physical Street Address	**City and Zip Code**
Sports Requested	

*Proof of Residency must be sent directly to Mike Fielder, Director of Athletics

**I have read and completed the noted steps for my student to participate in UIL activities through HEB ISD. I understand that my student's eligibility is dependent upon providing grades according to state and district guidelines. I further understand that should my student fail to meet the requirements of HEB ISD or UIL, they will be removed from the program and withdrawn from HEB ISD. By completing this application, I give permission for my student to ride the HEB ISD bus and attend HEB ISD events with the team/program for the season. I agree that I have been provided with a copy or a link to the HEB ISD Student-Athlete Handbook or other applicable UIL Program Handbook. I understand that the student athlete cannot play in UIL Competition and also Home School Leagues. I also cannot do any lessons or outside practice during HEB ISD School hours, only during the class in which I am enrolled.

***Some activities will be based on tryouts conducted at the appropriate time.

Parent Signature: _____ Date: _____

Email signed form to MikeFielder@hebisd.edu