

WILSON AREA SCHOOL DISTRICT
2040 Washington Blvd.
Easton, PA 18042
Phone 484-373-6000
Fax 610-258-6421



DR. HARRISON BAILEY, III
SUPERINTENDENT

AMY AUSTIN
ASSISTANT SUPERINTENDENT

STEPHANIE ARNOLD
BOARD SECRETARY-BUSINESS MANAGER

Request for Participation in Extra-Curricular Activity

School Year: _____

Student Name: _____ Date: _____

Education Method: Homeschool Charter School Cyber School Private School

Name of Educational Institution (if applicable): _____

Parent(s): _____ Grade: _____ Age: _____

Address: _____ Phone: _____

Request to participate in: _____
(Extra-Curricular Activity/Sport)

A separate request must be presented for each extra-curricular activity for which participation is being requested. Approval is valid for the current school year only.

Participation by a homeschool/charter/cyber/private student in any extra-curricular activity must be approved by the Wilson Area School Board prior to any involvement in that activity.

Please return the completed form to:

Mrs. Amy Austin
Assistant Superintendent
Wilson Area School District
2040 Washington Blvd.
Easton, PA 18042-3890

Approved _____	Not Approved _____	_____	_____
		Superintendent	Date