



# ATHLETIC DEPARTMENT PARTICIPANT FORM

### Circle sport of participation:

- |                     |                       |              |                  |
|---------------------|-----------------------|--------------|------------------|
| Football            | Volleyball            | Men's Soccer | Women's Soccer   |
| Men's Cross-Country | Women's Cross-Country | Cheerleading | Men's Basketball |
| Women's Basketball  | Baseball              | Softball     |                  |

### ATHLETE INFORMATION

NAME:					
ADDRESS:					
CITY:			STATE:		ZIP:
HIGH SCHOOL:			GRADUATION DATE:		
MILITARY STATUS:	None	Air Force	Army	Marines	Navy

### PREVIOUS COLLEGE(S)

Name:	Name:	Name:
Location:	Location:	Location:
Date of Enrollment:	Date of Enrollment:	Date of Enrollment:

### EMPLOYMENT HISTORY

Employer:	Employer:	Employer:
Location:	Location:	Location:
Date of Employment:	Date of Employment:	Date of Employment:

### COLLEGIATE PLAYING HISTORY

College:	College:	College:
Sport:	Sport:	Sport:
Date:	Date:	Date:

I have never participated in or signed a contract for any professional or semi-professional sport. My amateur standing is not in jeopardy. I hereby certify that the above statements are true and complete. I understand that falsification of any of the above statements would subject me to disciplinary action by the North Central Community College Conference (N4C) and Midwest Football Conference (MFC).

Signature: \_\_\_\_\_ Date: \_\_\_\_\_