

Academic Eligibility Form 2025-2026 Season

CLUB NAME:		
DIVISION:	VARSITY	JV
(Please circle)	Gold Silver Bron	ze Gold Silver Bronze
GRADING PERIO	DD:	DATE OF REPORT:
	ıly, if all players are	OT met the No Pass / No Play passing complete the above, sign and
PLAYER NAME		PLAYER JERSEY #
period, we cert	ify this report to be scanned and emaile	rds for the above stated grading accurate. d to Keith Andresen at
Team Rep:		Club Position:
Signature:		Date: