

Vermont Principals' Association
2020-2021 Independent Participation Application

Season _____ Sport _____

School Name and Address Submitting Application for Independent Participant:

Student's Name _____

Grade Level _____

School Name and Address of Affiliated School for Practice/Meets:

An independent participant must meet the eligibility rules of his/her home school

Home School _____ Affiliated School _____

AD's Name _____ Coach's Name _____

Principal's Signature _____

Date _____

Submit this form to: Vermont Principals' Association
2 Prospect Street, Suite #3
Montpelier, VT 05602

Each school should have on file a completed copy of this form. Failure by an independent participant to submit this form may result in non-acceptance to participate.
(Copy Carried by Coach and in the A.D. Office)