

**WEST SHORE SCHOOL DISTRICT**  
**Notice of Intent to Participate In Extra-Curricular Programs**  
**Home Education, Private School Coop or Cyber-Charter School Student-**  
**Secondary 2024-25 School Year**

To the Principal or Athletic Director of:

\_\_\_\_\_

(Name of West Shore School District School)

\_\_\_\_ I attest that I am the parent, guardian, or legal custodian of the student named below, and that he/she is enrolled in a District-approved home education program, or enrolled in a private school having a coop agreement with the West Shore School District.

\_\_\_\_ I attest that I am the parent, guardian, or legal custodian of the student named below, and that he/she is enrolled in an approved Pennsylvania cyber or charter school:

\_\_\_\_\_

(Name of School)

Student Name:		Grade:	
Street Address:		Date of Birth:	
City, Zip		Phone Number:	

I am requesting that my child participate in the following District activity/activities:

\_\_\_\_\_

By signing this form below, I acknowledge the following:

- 1) That \_\_\_\_\_ is my child’s assigned school as specified in Board Policy No. 206 Assignment Within District
- 2) That my child must comply with all policies, rules, and regulations of the governing organization of the activity including those related to participation fees
- 3) That my child will comply with all applicable policies of the West Shore School District, specifically all those relating to student conduct
- 4) That my child must abide by the Athletic Code of Conduct if participating in interscholastic athletics (student signature indicating agreement required below)
  - a) If participating in interscholastic athletics, I will:
    - i) Certify in writing to the Athletic Director, prior to the particular sports season, that my child who is enrolled in a home education program or private school, is academically eligible to participate based on PIAA and District- approved eligibility requirements

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- ii) Arrange for my child's cyber or charter school to provide information, prior to the particular sports season, that my child is academically eligible to participate based on PIAA and District-approved eligibility requirements.
- b) Submit a weekly verification form throughout the sports season to the Athletic Director by noon Friday
  - i) For a home education or private school student, verify that my child is academically eligible to participate in the sport for which he/she was accepted
  - ii) For a cyber or charter school student, arrange for such school to provide weekly verification that my child is academically eligible to participate in the sport for which he/she was accepted.
- 5) That I will communicate the need for any accommodations because of a disability to the Principal/Athletic Director at least thirty days prior to the start of the school year or practice period

Parent Signature	_____	Date	_____
Student Signature	_____	Date	_____
Athletic Director Signature	_____	Date	_____
Principal Signature	_____	Date	_____
Director of Student Services Signature	_____	Date	_____

***RETURN FORM TO BUILDING PRINCIPAL OR ATHLETIC DIRECTOR***