Physical Education Waiver

Student Name (last, first)	Student ID #	Date of Birth
The student listed has	s completed a Junior Varsity or	· Varsity sport.
Season 1 Sport:	School Year:	Season:
Coach Name (print)	Coach Signature	Date
Athletic Director (print)	Athletic Director Signa	ture Date
The student listed ha	c completed a lunior Varsity or	· Varsity sport
Season 2 Sport:	s completed a Junior Varsity or School Year:	Season:
Coach Name	Coach Signature	Date
Athletic Director (print)	Athletic Director Signa	ture Date
	School Use Only	
1st season: 15004100 INTER SPORT SEASON	1	
2nd season: 15004200 INTER SPORT SEASON	N 2	
School Counselor/Designee Signature	Date	
Registrar/IMT/IMS Signature		