

SUNSHINE STATE ASSOCIATION OF CHRISTIAN SCHOOLS ATHLETIC LEAGUE
APPLICATION AND READMISSION FORM (2021-2022)

SCHOOL NAME _____ DATE _____

MASCOT _____ SCHOOL COLORS _____

ADDRESS _____ CITY _____ ZIP _____

PHONE (____) _____ FAX (____) _____ EMAIL _____

Is your school a member in good standing with SSACS? _____

What grades will be in your school NEXT year? _____

PRINCIPAL'S NAME _____ PHONE _____

ATHLETIC DIRECTOR'S NAME _____ CELL PHONE (____) _____

NAME OF CHURCH _____ PASTOR _____

Listed below are the sports offered by the SSACS AL. Please check the sports you are planning to play next year. The schedule for next year will be made according to the information on this application.

BOYS: _____ VARSITY FLAG FOOTBALL _____ VARSITY BASKETBALL _____ JV BASKETBALL _____ VARSITY SOCCER	VARSITY: not turn 19 before Sept 1 (14 - 18) JUNIOR VARSITY: not turn 14 before Sept 1 (13 and 5 TH GRADE)
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GIRLS: _____ VARSITY VOLLEYBALL _____ VARSITY BASKETBALL _____ VARSITY SOCCER (tentative determined by interest)	_____ JV VOLLEYBALL _____ JV BASKETBALL
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Fees for the upcoming year will be \$275 for up to TWO (2) teams; \$550 for three (3) to (4) four teams; above (4) teams, the fee is \$110 per team. The first payment (1/2 of amount due) is due JUNE 1, with the second payment due AUGUST 1 of the current school year. Total dues may be paid in full by June 1. A school is NOT an official member until the fees are paid. 10% discount for SSACS Member schools.

We the undersigned agree and will abide by the by-laws of the Sunshine State Association of Christian Schools Athletic League, and will see that our students do likewise. We also agree to have a representative from our school at all the SSACSAL meetings or at least contact the Executive Director if that is not possible. This form is not valid unless BOTH the Principal and the Athletic Director sign.

PRINCIPAL _____ ATHLETIC DIRECTOR _____

DATE _____