

School:

FLORIDA INDEPENDENT CHRISTIAN ATHLETIC ASSOCIATION TEAM ELIGIBILITY LIST



Note: This eligibility list should be completed for each team that represents a school. Varsity and Middle School rosters should be completed separately, and a student should only appear on one roster. 6th-8th grade students listed on a school's Middle School roster will be eligible to compete with the Varsity team during postseason play, but can only participate in <u>ONE</u> championship tournament.

Mas		City:							
	ninistrator:etic Director:								
Head Coach:			Head Coach's Phone:						
	d Coach's Email:								
Assi	stant Coach(es):								
Spor	rt:	Varsity or MS:							
	Students' Full Name (as shown on their birth certificate)	Date of Birth	Age	Grade	Eligibility Start Date*	Number of Subjects Passed from Previous Academic Year	Signature Date on Physical Filed with School [†]	Signature Date on Liability Waiver Form#	
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2									
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5 6									
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+Phys #Liab By sig are p	bility Start Date – Indicate in this colum sical/Medical History Form – Physical ev ility Waiver Form – Liability waiver is va gning this form I, the School Administra hysically and academically eligible and i cipation in the FICAA sport listed on this	valuation form is valid lid for one academic tor (or their designed in "good standing". I	d for one year, and e), affirm	calendar yea I can be used that all of th	r from date of eva for multiple spor te information list	aluation as written on ts seasons within tha ted above is truthful	n form, and signed by at academic year. and valid, and that a	a physician	
	Signature of Adminis	Signature of Administrator (or Designee)				Date of Signature			
	Printed Name of Administrator (or Designee)				Title of Signee (if Designee to Administrator)				