



# NEW STUDENT FORM

## Del Norte High School Athletics

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Current Home Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Phone \_\_\_\_\_

Previous Home Address \_\_\_\_\_

Previous School \_\_\_\_\_

Did you play a sport at your previous school? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, what sport did you play and at what level? \_\_\_\_\_

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