



## Parent and Student Eligibility Waiver

Student-Athlete Name (please print) \_\_\_\_\_

I understand and agree to abide by the procedures in the South Carolina High School League (SCHSL) By-Laws. To enable the SCHSL to determine the herein-named student's eligibility to participate in interscholastic athletics in the SCHSL member school, I consent to the release of any and all portions of school record files to SCHSL, of the herein-named student, specifically including, without limiting the generality of the foregoing, birth and age records, name and residence address of parent(s) or guardian(s), residence address of the student, academic work in progress and/or completed, grades received, and attendance data.

Signature of Athlete \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent \_\_\_\_\_ Date \_\_\_\_\_