



NEW STUDENT FORM Del Norte High School Athletics

Student Name _____ Grade _____

Current Home Address _____

Date of Birth _____ Phone _____ Email _____

Previous Home Address _____

Previous School _____ Athletic Directors Name _____

Previous School Address _____

Dates/Year attended previous school. From _____ To _____

Did you play a sport at you previous school? Yes _____ No _____

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

Do you plan on playing a sport at Del Norte High School? _____