

**JEFFERSON CITY SCHOOL DISTRICT
NEW STUDENT ACTIVITIES INFORMATION**

District Activities Director: Ehren Earleywine Email: ehren.earleywine@jcschools.us
 Administrative Assistant: Heather Hackman Email: heather.hackman@jcschools.us



Capital City High School
 Activities Director: Robert Ndessokia
 Administrative Assistant: Kim Pike
 Email: robert.ndessokia@jcschools.us or
kim.pike@jcschools.us



Jefferson City High School
 Activities Director: Damon Wells
 Administrative Assistant: Jim Bohannon
 Email: damon.wells@jcschools.us or
jim.bohannon@jcschools.us

PLEASE COMPLETE IF YOU ARE INTERESTED IN PARTICIPATING IN ANY ACTIVITIES (see list bottom of page)

Today's Date: _____ Student's Name: _____ Date of Birth: _____

Male / Female (please circle one) Home Phone #: _____ Mobile Phone#: _____

Parent (s) Guardian Name: _____

Previous Address: _____ City/State/Zip: _____

Current Address: _____ City/State/Zip: _____

1) Has the entire family had a complete change of residence? (By-law 238) ___Yes ___No
 (everyone living in the household at the previous address moved to the new address)

Date you moved to the new address: _____

2) Is your address within the geographic attendance area of the respective school? ___Yes ___NO

3) Name of previous school: _____ School phone: _____

School address: _____ City/State/Zip: _____

***Dates you attended this school: Start Date: _____ End Date: _____

If you were in this school less than 1 full year (365 days) list any additional schools attended below.:

Name of additional school: _____ School phone: _____

School address: _____ City/State/Zip: _____

Dates you attended this school: Start Date: _____ End Date: _____

Current Grade in School (please circle one) 7th 8th 9th 10th 11th 12th

Please CIRCLE the following Activities you are interested in:

Baseball 9 th -12 th	Basketball 7 th -12 th	Cheer 9 th -12 th	Choir 9 th -12 th	Cross Country 7 th -12 th	Dance 9 th -12 th
Football 7 th -12 th	Marching Band 9 th -12 th	Golf 9 th -12 th	Orchestra 9 th -12 th	Scholar Bowl 9 th -12 th	Soccer 9 th -12 th
Softball 9 th -12 th	Speech & Debate 9 th -12 th	Swimming 9 th -12 th	Track 7 th -12 th	Tennis 9 th -12 th	Volleyball 7 th -12 th
					Wrestling 7 th -12 th

***I certify that this information is legally accurate.

 Signature of Parent/Guardian *** (we must have signature and date of parent/guardian to process)

 Date

Office Use Only: Rec. _____ Reg. _____ Filed MSHSAA _____ Dec. _____