



SOUTHEASTERN CHRISTIAN CONFERENCE
Document Verification Form
SECC Bylaw 6.1.4
(One form per sport)



School Name: _____

Date: _____

Sport: _____

List	Last Name	First Name	Jersey	Grade	Birth Date	Birth Cert	Student TR - HS - SS	Consent Letter	EL2 (Physical)
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

NOTE: (TR) = Traditional Registered Student - (HS) = Home School Student - (SS) = SECC Sister School

My signature below verifies that the school listed above has in its possession and on file the information and forms for each player participating in the above-named sport.

Printed Name and Position of School Official

Signature of School Official

My Commission Expiration Date: _____

Notary Seal and Signature

** This form must be signed and notarized and must be submitted prior to playing your first game.*