Interscholastic Ice Hockey Participation Opportunity (ORC 3313.536)

A student who attends a school located within a public school district that does not offer the sport of Ice Hockey is permitted, per ORC 3313.536, to petition to play that sport at another public school located within 20 miles (as the crow flies), subject to the agreement of the Superintendent of the school where the student is attending and the Superintendent of the school where the student is petitioning to play. If either Superintendent does not agree to allow the participation, then the student will not be permitted to play Ice Hockey at the other school. This form has been developed to assist Superintendents with memorializing the agreement.

Student Name:	Student Grade Level:
School of Attendance:	
Conditions: In accordance with state law, the f	ollowing conditions are acknowledged and agreed upon:
interscholastic ice hockey at its school (<i>or A</i> 2. Proximity Requirement- The school at whi (20) miles of the school of attendance (as th	ch the student is petitioning to play is located within twenty
Terms of Participation:	
and eligibility standards of both school districts 2. The student must also comply with all OHSA where the student is playing Ice Hockey, and tea	A bylaws, the Athletic Department policies at the school
unless other arrangements are agreed upon. 4. This agreement applies only to participation i extend to any other athletic or extracurricular p	in the interscholastic ice hockey program. It does not rograms.
conduct, or compliance are not met. 6. If participation takes place at a school located wit participate in ice hockey at the district school clo	s agreement with written notice if conditions of eligibility, thin a multi-HS district, the student shall be assigned to esset to the parents residence, in accordance with OHSAA
business rules for the assignment of non-enrolled st	tudents.
Signatures: By signing below, both parties affire the student in the	m their approval of this agreement and the participation of High School ice hockey program
Superintendent Releasing Participation:	Superintendent Accepting Student Participation:
Signature:	_ Signature:
Print Name:	_ Print Name:
School District*:	School District*: *School must be located within 20 miles of school student attends
Date:	Date:

**Though not required, please email a signed copy of this form to John Kronour jkronour@ohsaa.org for

record keeping purposes**