

**CIF - SAN DIEGO SECTION  
RESIDENCE & Eligibility VERIFICATION  
Athletic / Extracurricular Participation**

**\*\* To be completed by individual with whom student resides \*\***

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Please Print

Athlete Name : \_\_\_\_\_ Grade : \_\_\_\_\_  
Last Name First Name

Sport(s) : \_\_\_\_\_

**1. I am the one with whom this student-athlete resides: (check one box)**

- Parent                       Legal Guardian                       Relative  
 Caretaker                       Foster Parent                       Emancipated Minor

**2. I affirm that this student resides at the Following Address:**

Street Address	Apt. or Unit	
City / State	Zip Code	Telephone Number

**Parents' Residence ( if different than listed in #2)**

Mother's Street Address	City
Father's Street Address	City

**3. Student Status**

- Continuing VHS student                       New Resident                       Inter-District Transfer  
 Incoming 9<sup>th</sup> grader                       Administrative Placement                       Intra-District Transfer

**4. School attended last year**

School	City
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**5. I understand that this street address is within Vista High School boundaries and / or I have followed the district transfer procedures. I also understand that falsifying this information will cause team forfeiture and immediate ineligibility.**

\_\_\_\_\_  
Signature of person with whom student – athlete resides                      Date

\_\_\_\_\_  
Printed name of the person checked on line 1