



Sport Club Eligibility Form

Contact Person Name & Number	Team Name	Date	Date Needed By
Full name of all students	Student ID Number	Is this person a full time student at SSU?	If not a full time student, how many units does this person have? REGISTRAR: Please note who is not a full time student.
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With this official stamp or seal I hereby certify that the above information is correct		I hereby certify that only students from this list, or another such list will represent our institution	



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College Registrar, Bursar, or Qualified	College Designated Representative
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