

# Arkansas School Band and Orchestra Association

## Certificate of Eligibility

|   |  |       |  |  |  |       |  |
|---|--|-------|--|--|--|-------|--|
| Date:   |  |       |  | School:                                  |  |       |  |
| Classification:   |  |       |  | Director:                                |  |       |  |
| Due September 30 for 1 <sup>st</sup> Semester<br>Due January 31 for 2 <sup>nd</sup> Semester  |  |       |  |  |  |       |  |
| SEND one copy to your Region Chairman. <u>DO NOT SEND</u> a copy to the ASBOA office.   |  |       |  |  |  |       |  |
| We certify that the following students meet all the eligibility requirements, <b>including physicals if needed</b> , for participation in interscholastic events according to the Arkansas State Department of Education, the Arkansas Activities Association, the Arkansas School Band and Orchestra Association, and our school district. They are bona-fide members of the organization they are representing. |  |       |  |  |  |       |  |
| STUDENT   |  | GRADE |  | STUDENT                                  |  | GRADE |  |
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|   |  |       |  |  |  |       |  |
| Director's Signature:   |  |       |  | Principal or Superintendent's Signature: |  |       |  |

Do NOT SEND to the ASBOA Office  
SEND TO YOUR REGION CHAIRMAN BY ABOVE DEADLINES