



HOME SCHOOL FORM

This form is to be completed for participants in the INYFC program that are enrolled in home school.

Legal Name of Participant

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Grade Level for the 2026-27 School Year: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current High School Boundary: \_\_\_\_\_

Home School Affiliation (this is required for this form to be accepted): \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Association/Team Name: \_\_\_\_\_ Sport: Football / Cheer

Football Division:.....2<sup>nd</sup> / 3<sup>rd</sup>/4<sup>th</sup> / 5<sup>th</sup> 6<sup>th</sup> 7<sup>th</sup> 8<sup>th</sup>

Parent/Guardian's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

As the above-named participant is enrolled in home school, we the undersigned, swear that the information provided is in fact true.

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_