

ARKANSAS ACTIVITIES ASSOCIATION

2900 Willow Street

North Little Rock, AR 72114-2233

Office: (501) 771-2205 Fax: (501) 771-1027

Certificate of Eligibility for Non-Athletics

We certify that we are familiar with the rules governing the eligibility of students under the Constitution, and Bylaws of this Association, that we have personally checked this list, and that the persons or organization named have complied in all respects with the requirements for eligibility under the rules and are entitled to represent this school in activities during the

_____ semester of _____.
(1st or 2nd) Year

Respectfully,

School

Address

Sponsor or Director Signature

Superintendent or Principal Signature

Please attach this form to each list of names or application and send to ArkCDA.

DO NOT SEND TO ARKANSAS ACTIVITIES ASSOCIATION