

Mount Mystics 2020-2021

Player Profile

STUDENT ATHLETE INFORMATION PLEASE PRINT CLEARLY:

SPORT:		YEAR:	
Last Name:			
MSVU Student ID#:	Age:	Date of Birth:	Height:
Local Address:			Province
Postal Code:	Country:	Phone: (H):	(C):
Home Town:		High School	
Athlete E-Mail:			
		Expiry:	
Current allergies & medical condition	าร:		
Concussion history:			
Awards, Accomplishments, Highlight	s for the previous 3 \	'ears:	
<u> ELIGIBILITY – STUDENT ATHI</u>	<u>ETE INFORMATIO</u>	<u>DN</u>	
Year of Study – please indicate 1st,	2^{nd} , 3^{rd} , 4^{th} or 5^{th} :		
Program of Study:		Major:	Minor:
Commencement Year at MSVU:	Estimated Completion Year:		
Year(s) playing as a Mount Mystic -	- INCLUDE THIS YEAF	₹:	
Have you ever signed a Pro or Ama			
Have you previously attended anot	· · ·		
Have you previously participated in	· · ·		
If Yes to any of the questions above	e, please provide deta	ails: Prior University/Coll	ege You Played For:
1. Year(s): Univ	1. Year(s): Sport:		
2. Year (s): Univ	Jniversity:Sport:		
Note: A Varsity Student Athlete comp	eting in the ACAA has	a maximum of 5 years of el	igibility. Having your name appear or
an official game sheet in a league ga	me/match in an ACAA	sport, will constitute the us	se of 1 year's eligibility.
PARENT/GUARDIAN INFORMA	<u>ATION</u>		
Parent/Guardian Name(s):			
Address:		Province:	Postal Code:
Home Phone:	Work Phone:	Ce	ell:
Email(s):			
Alternate Emergency Contact:		Relationship to Athlete:	
Home Phone:	Work Phone: Call:		