



Brazoria County Fair Association, Inc.

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October 9-17, 2020

VERIFICATION OF ELIGIBILITY

Student's Name _____

Student's School _____

This information is requested in accordance with the requirements of Senate Bill One and in cooperation with the Texas Education Agency and local public school board policies.

Check () one:

- () I do certify that the student is academically eligible to participate in the extracurricular activities of the Brazoria County Fair.
- () I do not certify this student because he/she is **NOT** academically eligible to participate in the extracurricular activities of the Brazoria County Fair.

Registrar Signature _____ Date _____

Registrar's Name (please print) _____

Phone & Extension _____