

# ***US Athletic Program Alternative Waiver Form***

(Application for special consideration in a program that serves as an alternative to the Athletic Department requirement options.)

## ***Athletic Program Alternative Policies***

**Alternative Athletic Programs:** Students with demonstrated ability and a major commitment to training for a sport/ activity that BB&N does not offer (golf riding, skiing, swimming, figure skating), may apply for an off-campus Athletic Program Waiver. The Independent School League Bylaws state, "Multi-season, single sport: Athletes may not receive credit for participating in a sport (offered) for more than one season in an academic year". All such proposals, and any additional season requests (fall, winter or spring) must be submitted to the Director of Athletics no later than the first official day of seasonal tryouts in order to seek approval. Seasonal tryout dates will be communicated to students/ parents via [www.bbns.org](http://www.bbns.org) and the seasonal Athletic Department Information Letter. Waiver Forms are available in the Athletic Department

**Alternative Artistic Programs:** Students with a major commitment and demonstrated ability in the arts, including in-School tech, drama or dance (Grades 9-12, Tech and Drama not available in fall season for 9<sup>th</sup> graders), may request an exemption from the Athletic Requirement for the season of involvement. All students who receive Artistic Waivers must participate within the Athletic Program for at least one season per academic year, unless special request granted. Proposals (fall, winter, or spring) must be submitted to the Head of the Arts Department no later than the first day of seasonal tryouts in order to seek approval. Seasonal tryout dates will be communicated to students/parents via [www.bbns.org](http://www.bbns.org) and the seasonal Athletic Department Information Letter. Waiver Forms are available in the Arts Department Office.

**Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Date:** \_\_\_\_\_

***Student's Athletic Department participation history for the current academic year:***

Fall \_\_\_\_\_ Winter \_\_\_\_\_ Spring \_\_\_\_\_

**1. Sport/ Activity and focus of your program:**

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**2. Name and address of activity location:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supervisor Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Supervisor Signature: \_\_\_\_\_

**3. Days and Times of Activity:**

Activity		Hours
Sunday	_____	_____
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____
Saturday	_____	_____

**4. Signatures of Approval:**

Parent/ Guardian \_\_\_\_\_

Advisor \_\_\_\_\_

Applicant \_\_\_\_\_

Athletics Department \_\_\_\_\_

Arts Department (For Artistic waivers only) \_\_\_\_\_

