



SCHOLASTIC ELIGIBILITY CERTIFICATION

This form is to certify scholastic eligibility for students participating in Southeastern Color Guard Circuit (SCGC) events. All members of any color guard or percussion ensemble competing in any scholastic class must be approved for participation by the principal of the sponsoring school. Each color guard or percussion ensemble shall submit a notarized form prepared by SCGC listing all approved participants of that school's color guard or percussion ensemble.

Unit: _____
 Type: _____ Class: _____
 School Name: _____
 Address: _____

 Principal Name: _____
 Contact Info: _____ Fax: _____ Email: _____
 Director or Instructor Name: _____
 Contact Info: _____ Fax: _____ Email: _____

I, _____, (Principal) hereby certify that the students listed below are all students of _____, and are approved by the school and /or school district to participate as a member of the _____ color guard or percussion ensemble.

LIST OF STUDENTS:

Date: _____

Signed: _____
(School Principal)

Personally came before me _____, Principal of _____ School, being duly sworn, states on his/her oath that he/she executed this document and has the authority of the school and/or school district to execute same on its behalf.

SWORN TO AND SUBSCRIBED before me, this ____ day of _____, 2008.

My Commission Expires: _____
NOTARY PUBLIC
