

# Sports Broadcasting Club Application

All applications must be filled out and turned in by Friday September 5th to be considered for a spot in the club.

Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Homeroom Teacher: \_\_\_\_\_

In a short paragraph describe yourself ? (Interest, Favorite Sports, Work Ethic)

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What do you hope to gain or learn from being a part of this club?

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Circle Yes or No for the following questions:

Have you ever used Audio and Visual equipment before? (Podcast equipment, Microphones, Podcast apps, editing software, cameras) Yes No

Do you currently play or plan to play any school sports? Yes No

Will you be able to have a ride to and from club events after school?(Will there be someone to take you to and pick you up from the home games we broadcast?) Yes No

In the Section Below you will need your teachers signature to complete:

Teachers, if you think this student is capable and deserves to be a part of this club and endorse that decision please sign next to your subject and write their grade in your class next to it. Thank You!!

Science: \_\_\_\_\_ Grade: \_\_\_\_\_

Social Studies: \_\_\_\_\_ Grade: \_\_\_\_\_

Math: \_\_\_\_\_ Grade: \_\_\_\_\_

ELA: \_\_\_\_\_ Grade: \_\_\_\_\_

Exploratory: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent Section:

Parents we ask that you please look over this application and make sure you are ok with allowing your child to participate in this club. If you have any questions about the club you wish to ask before allowing your child to apply please email

Coach Thomas at [ethomas@longcountyschools.org](mailto:ethomas@longcountyschools.org) and he will answer your questions. If you have no questions and allow your child to apply please sign

below with them. Thank You!!

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_