



# Idaho High School Activities Association

8011 Ustick Road      Boise, ID 83704  
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 E-mail: admin@idhsaa.org

## Regular Membership Application Form

**Any public or private school within the State of Idaho that meets the accrediting standards of secondary schools as required by the State Board of Education and facility/program requirements for interscholastic competition as outlined by the IHSAA Board of Directors is eligible to become a regular member of the corporation. Application for membership by schools in the State must be approved by a two-thirds vote of the Board of Directors as a final reading at the January IHSAA Board of Directors Meeting the school year prior to membership.**

Name of School: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 (if different than mailing address)

Superintendent / CEO: \_\_\_\_\_ Phone: \_\_\_\_\_

Superintendent /CEO Fax #: \_\_\_\_\_ Superintendent / CEO E-mail Address: \_\_\_\_\_

Principal: \_\_\_\_\_ Phone: \_\_\_\_\_

Principal's Fax #: \_\_\_\_\_ Principal's E-mail Address: \_\_\_\_\_

1. Type of School:     Public     Private     Charter

**Any public or private school within the State of Idaho seeking regular membership in the IHSAA must meet the accrediting standards of secondary schools as required by the Idaho State Board of Education. Please attach a letter of verification from the State Department of Education that your school has met their accrediting standards for secondary schools.    Letter attached:     Yes     No**

**If no, please explain \_\_\_\_\_**

Please describe the purpose and origin of the school:

Purpose:

Origin:

2. Check the IHSAA activity programs in which the school will participate:

	<b>Fall Activities</b>			<b>Winter Activities</b>			<b>Spring Activities</b>			
	Boys	Girls	Co-ed	Boys	Girls	Co-ed	Boys	Girls	Co-ed	
Cross Country	<input type="checkbox"/>	<input type="checkbox"/>		Basketball	<input type="checkbox"/>	<input type="checkbox"/>		Golf	<input type="checkbox"/>	<input type="checkbox"/>
Football	<input type="checkbox"/>			Wrestling	<input type="checkbox"/>			Tennis	<input type="checkbox"/>	<input type="checkbox"/>
Soccer	<input type="checkbox"/>	<input type="checkbox"/>		Cheer			<input type="checkbox"/>	Track	<input type="checkbox"/>	<input type="checkbox"/>
Swimming	<input type="checkbox"/>	<input type="checkbox"/>		Dance		<input type="checkbox"/>		Softball		<input type="checkbox"/>
Volleyball		<input type="checkbox"/>		Debate			<input type="checkbox"/>	Baseball	<input type="checkbox"/>	
Drama			<input type="checkbox"/>					Speech		<input type="checkbox"/>

Music (no season): Vocal       Instrumental

3. Will the school be able to meet or exceed the IHSAA facility requirements to host competition in the above activities in which the school desires to participate: Yes  No

**IHSAA Facility Requirements**

**Please check yes or no to each of the following:**

A. Demonstrate the ability to host competition and provide a safe and appropriate environment for those activities the school chooses to sponsor. Yes  No

B. Demonstrate the ability to meet the following field and gym conditions:

1. Meets National Federation field/court specifications:

(ex. – size, length, ceiling height) Yes  No

2. Playing surface – safe and adequately maintained, properly marked Yes  No

3. Crowd control capabilities – (Security barrier) Yes  No

C. Demonstrate the ability to meet the following facility amenities:

1. Adequate spectator seating/viewing area Yes  No

2. Available restrooms for public Yes  No

3. Separate restrooms for competitors/officials Yes  No

4. Score boards – public address system when needed Yes  No

5. Crowd control management Yes  No

6. Adequate locker room for visiting teams Yes  No

7. Adequate team areas – (sideline benches, etc.) Yes  No

8. Adequate parking for visiting team buses and spectators Yes  No

4. If you answered no to any of the above facility requirements, please explain how your school plans to comply with IHSAA facility requirements.

A.

B.

C.

*“I certify that I have reviewed and understand the IHSAA Rules and Regulations regarding membership in to the Association. I further acknowledge that this school will follow all IHSAA Rules and Regulations and I understand that violating any of the guidelines may result in penalties/sanctions from the local Board of Control and/or the IHSAA.”*

\_\_\_\_\_  
Superintendent / CEO

\_\_\_\_\_  
Date

This membership application has been approved  denied  by the Board of Control IHSAA membership review committee from District 1 2 3 4 5 6 (circle one).

\_\_\_\_\_  
District Board of Control President

\_\_\_\_\_  
District Board of Control Secretary