

ATHLETE INFORMATION FORM

(please fill out legibly and completely)

ATHLETE

Full Name: _____

Mailing Address: _____ City: _____ Zip: _____

Home Phone: _____

Cell Phone: _____ May we text you? Yes No

Email: _____

Which method of communication do you prefer? TEXT EMAIL PHONE CALL

Age: _____ Birth Date: _____ Gender: male female

HS Graduation: 20____

Parent Guardian #1

Name: _____

Cell Phone: _____ May we text you? Yes No

Email: _____

Which method of communication do you prefer? TEXT EMAIL PHONE CALL

Parent Guardian #2

Name: _____

Cell Phone: _____ May we text you? Yes No

Email: _____

Which method of communication do you prefer? TEXT EMAIL PHONE CALL