STUDENT-ATHLETE INFORMATION

(Please write legibly using blue or black ink)

| Athlete - Last Name: | Athle | te - First Name: | | MI: | |
|---|---|--|---|-------------------------|--|
| Date of Birth: | ie: | ☐ Male | | · · · · · | |
| Sport(s): | Freshman S | ophomore Junior | Senior Other | i | *** |
| Middle School (Grade) | - Y ₂ | | | | |
| Permanent (Off Campus) Address | | A same to the | <u> </u> | | , |
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| | , , , , | | | | ě. |
| | City | | State | | |
| Student-Athlete - Cell Phone: | | Student-Athlete - Alter | nate Phone: | | |
| Student-Athlete - Email Address: | | | · | 2 | |
| | | | | - | |
| | | | | | ************** |
| | PARENT/GU | ardian infori | MATION | gr i | |
| Parent/Guardian - Name: | | Parent/Guardian - Ph | one: | | aas oo laa ka k |
| | | | | eremined | |
| Parent/Guardian - Email Address: | | | | | The g |
| | | | | والدور والمتحدث والمعاد | |
| t , a , | EWED.C | ENCY CONTACT | | | |
| | (Please list two cont | acts other than nare | າt/guardian) | | |
| 8 * | | | N 9 | | • , |
| Primary Contact: | | Relationship to Stud | ent-Athlete: | | |
| | | | | 6 , 4 | |
| Cell Pi | hone # | Alternate Pi | | or " | |
| er en | | | | | |
| Secondary Contact: | | Relationship to Stud | enL-Athiete: | | |
| و و دور دور دور دور دور دور دور دور دور | | | in the second | | |
| | | روانگ افغاند میرود. از در | | 22 | |
| Cell Ph | one# | Alternate Pi | hone # | | |
| In an emergency, i authorize the | Department of Sports f | Aedicine und offiliated | providers to cont | act the person | (s) listed above. |
| Student-Athlete - Signature: | name at the second second second second second second | | D; | ate | |
| Parent/Guardian - Signature: | | | | ite | |
| | | | | | |

(If student-athlete is under 18 years old)