

_____ Date of Birth _____ Grade _____ Gender _____

Student's Last Name

Student's First Name

Month Day Year

Please understand that it is your responsibility as the parent/legal guardian to ensure that the information provided on this form is current. Please notify the Athletics Department immediately of any changes. You only need to enter information that has changed from last year. Thank you.

FAMILY INFORMATION

FAMILY NAME

HOME TELEPHONE

FAMILY EMAIL ADDRESS

STREET ADDRESS

CITY

ZIP

FAX NUMBER

DAD NAME (First & Last)

EMPLOYER

HOURS (i.e., 9-5)

DAD WORK EMAIL

ADDRESS

CITY

DAD WORK PHONE

DAD CELL

MOM NAME (First & Last)

EMPLOYER

HOURS (i.e., 9-5)

MOM WORK EMAIL

ADDRESS

CITY

MOM WORK PHONE

MOM CELL

Fill out the form below if you are ordering a Uniform Bag.



I would like to order a bag for \$30

Name: _____

I would like to order a bag with my name on it for \$35

Name as you would like it on bag:
