



Athletic Association
Registration &
Emergency Contact Information

Sport: _____ **School Year:** _____

There is an **Athletic Fee of \$60 (\$40 for Little Dribblers and Little Spikers)** per child. **Please DO NOT send a check, this will be billed through FACTS.** There will be separate registration dates for each sport – this form is good only for the sport listed at the top of the page. There is a cap of \$240 per family per year.

Family Name: _____

Preferred Phone Number: _____

Preferred E-Mail Address: _____

Please list any medications, allergies, condition, etc. or “none” for each athlete:

Athlete 1 Name: _____ Grade: _____

Notes: _____

Athlete 2 Name: _____ Grade: _____

Notes: _____

Athlete 3 Name: _____ Grade: _____

Notes: _____

Athlete 4 Name: _____ Grade: _____

Notes: _____

Emergency Contact Information:

Contact 1 Name: _____ Phone: _____

Contact 2 Name: _____ Phone: _____

Contact 3 Name: _____ Phone: _____