

SOUTH LAKES ATHLETE INFORMATION FORM

ATHLETE'S NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____ GRADE: _____

SPORTS: _____

DAD'S NAME: _____

WORK PHONE: _____ EMAIL: _____

MOM'S NAME: _____

WORK PHONE: _____ EMAIL: _____

GUARDIAN'S NAME : _____

WORK PHONE: _____ EMAIL: _____

*Many parents are willing to help the coaches and teams. We will not "wear out our welcome", but hope that we can count on each of you from time to time to assist in the area which you are most comfortable helping so we may best utilize your talents!

- | | |
|---|-----------------------------|
| _____ BOOSTER TABLE | _____ ADS/PROGRAM (SUMMER) |
| _____ PHYSICALS | _____ TEAM MOM/DAD |
| _____ CORPORATE SPONSORS/ DONATIONS | _____ GOLF TOURNAMENT |
| _____ CARPENTRY | _____ CLOCK OR BOOK |
| _____ CONCESSION (FALL, WINTER, SPRING) | _____ TRANSPORTAION |
| _____ FIELDS (WEED EAT/ MOW/ ETC.) | _____ MAKE PHONE CALLS |
| _____ BOOSTER REP OR OFFICER | _____ PAINT FIELDS |
| _____ AIR/HEATING/ELECTRICAL | _____ VIDEO/TAKE PICTURES |
| _____ SCORER/TIMER (GYMNASTICS/SWIM/DIVE) | _____ DONATIONS(\$\$/GIFTS) |
| _____ ANNOUNCER (SOC/LAX/SB/B) | |

**COMMENTS/QUESTIONS/SUGGESTIONS
CALL LINDA JONES, D.S.A.
703-715-4518*