



MARIAN ATHLETIC DEPARTMENT INFORMATION SHEET

Student Name _____

School Attended in 8th Grade _____

Circle grade you will be in for the 2019-2020 Academic Year – 9 10 11 12

Parent Name(s) _____

Parent Email(s) _____

Parent Phone - Primary _____ Secondary _____

Indicate the Sports of interest by placing a check in the box to the left of that sport:

<input type="checkbox"/>	Cheerleading (Fall Season)	<input type="checkbox"/>	Girls Cross Country (Fall Season)
<input type="checkbox"/>	Boys Cross Country (Fall Season)	<input type="checkbox"/>	Girls Golf (Fall Season)
<input type="checkbox"/>	Football (Fall Season)	<input type="checkbox"/>	Girls Soccer (Fall Season)
<input type="checkbox"/>	Boys Soccer (Fall Season)	<input type="checkbox"/>	Boys Tennis (Fall Season)
<input type="checkbox"/>	Volleyball (Fall Season)	<input type="checkbox"/>	Dance (Fall Season)

<input type="checkbox"/>	Girls Basketball (Winter Season)	<input type="checkbox"/>	Boys Basketball (Winter Season)
<input type="checkbox"/>	Cheerleading (Winter Season)	<input type="checkbox"/>	Dance (Winter Season)
<input type="checkbox"/>	Hockey (Winter Season)	<input type="checkbox"/>	Girls Swimming (Winter Season)
<input type="checkbox"/>	Boys Swimming (Winter Season)	<input type="checkbox"/>	Wrestling (Winter Season)

<input type="checkbox"/>	Baseball (Spring Season)	<input type="checkbox"/>	Boys Golf (Spring Season)
<input type="checkbox"/>	Girls Lacrosse (Spring Season)	<input type="checkbox"/>	Boys Lacrosse (Spring Season)
<input type="checkbox"/>	Rugby (Spring Season)	<input type="checkbox"/>	Girls Tennis (Spring Season)
<input type="checkbox"/>	Girls Track & Field (Spring Season)	<input type="checkbox"/>	Boys Track & Field (Spring Season)
<input type="checkbox"/>	Softball (Spring Season)	<input type="checkbox"/>	

For office use only: Initials of Collection _____ Date _____

Amount Paid _____ Cash _____ Check # _____ Ads _____