



**New West Charter High School Athletics**

**Student-Athlete Information Form**

**School Year:** \_\_\_\_\_ **Sport:** \_\_\_\_\_

**Student-Athlete's Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Age:** \_\_\_\_\_ **Birthdate:** \_\_\_\_\_

**Student-Athlete's Home Address:**

\_\_\_\_\_  
\_\_\_\_\_

**Father's Name:** \_\_\_\_\_  
**Phone # Home:** \_\_\_\_\_ **Cell:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_  
**Phone # Home:** \_\_\_\_\_ **Cell:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

**Guardian's Name:** \_\_\_\_\_  
**Phone # Home:** \_\_\_\_\_ **Cell:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

**Emergency Contact Information:**

**Emergency Contact 1**

**Name:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_

**Emergency Contact 2**

**Name:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_

*I give my son/daughter the permission to participate in athletics at New West Charter High School and understand that participation is a privilege.*

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_