



PERSONAL INFORMATION – 2009/2010

(Please complete this entire form. Where there are siblings from different parents, please use separate forms).

List each player from the same family on the lines below.

Name: _____ DOB: _____ Grade: _____ School: _____

Name: _____ DOB: _____ Grade: _____ School: _____

Name: _____ DOB: _____ Grade: _____ School: _____

Name: _____ DOB: _____ Grade: _____ School: _____

Parent Names: _____ Phone: (H) _____

Address: _____ City: _____ Zip: _____

Father: (O) _____ (C) _____ Email(s): _____

Mother: (O) _____ (C) _____ Email(s): _____

Alternate Email addresses: _____

- Additional Parent/Guardian Name and Address (please complete this section only when parents do not reside together)

Parent Name: _____ Phone: (H) _____

Address: _____ City: _____ Zip: _____

Contact: (O) _____ (C) _____ Email(s): _____

- Emergency Contact Information (please provide information for a non-parent in case of emergency)

Emergency Contact's Name: _____

Emergency Contact's Phone Number(s): _____

<p>Office Use Only</p> <p>Registrar: _____</p> <p>Date: _____</p>
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