

TRACK SPRING 2015

HOLY SPIRIT JYCO REGISTRATION

Child's Full Name _____

Grade _____ Sex _____ Birth Date _____

School _____ CCD (if applicable) _____

Parents' Names _____

Home Address _____

City _____ Zip _____ E-mail 1: _____

E-mail 2: _____

Phone(s) Home _____ Work _____

Cell(s) _____

Name of Emergency Contact _____

Relationship _____ Telephone Number(s) _____

List any medical problems, limitations, or other information for child this child

Parent/Guardian Name(s) (Print)

Date

IMPORTANT INFORMATION

Holy Spirit Fall 2015 Track Program

The Fee is \$25.00 per athlete. Payment by check or web form at
<http://holyspiritchurch.us/ministries/community/cyo-sports/cyo-registration/>

Submit all web site forms & checks (one per family made out to 'Holy Spirit') to: Katie Bidinger, C/O Holy Spirit School, 703-978-7117 ext. 1502

Payment & Registration Form must be received NLT Tuesday, April 20, 2015.

Questions? Contact Holy Spirit Cross Country Coordinator - Katie Bidinger, Holy Spirit School, 703-978-7117 ext. 1502, email: Kbidinger@holyspiritflames.org