

**SKYLINE HIGH SCHOOL ATHLETICS  
INFORMATION SHEET**

(Sport) \_\_\_\_\_

**NAME** \_\_\_\_\_ **GRADE** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY, ZIP** \_\_\_\_\_

**TELEPHONE #'S** \_\_\_\_\_

**DATE OF BIRTH** \_\_\_\_\_ **HEIGHT** \_\_\_\_\_ **WEIGHT** \_\_\_\_\_

**PARENTS' NAMES** \_\_\_\_\_  
(First & Last)

**LIVE WITH** Mother      Father      Both      Share Time      Guardian  
(Circle One)

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**WHAT IS YOUR PRIOR EXPERIENCE IN THIS SPORT?** \_\_\_\_\_

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**WHAT POSITION OR POSITIONS DO YOU FEEL MOST COMFORTABLE PLAYING?** \_\_\_\_\_

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**DO YOU PLAY A FALL SPORT?** (Circle One)    Bowling    Cross Country    Football  
Girls Golf    Girls Tennis    Girls Volleyball

**DO YOU PLAY A WINTER SPORT?** (Circle One)    Boys Basketball    Girls Basketball  
Boys Soccer    Girls Soccer    Wrestling

**DO YOU PLAY A SPRING SPORT?** (Circle One)    Badminton    Baseball  
Boys Golf    Softball    Swimming    Boys Tennis    Track

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**WHAT IS YOUR CURRENT GRADE POINT AVERAGE?** \_\_\_\_\_

**HAVE YOU EVER BEEN INELIGIBLE FOR SPORTS BECAUSE OF GRADES?** \_\_\_\_\_

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**ARE YOU PLAYING IN AN OFF-SEASON PROGRAM THIS YEAR? IF YES, WHAT PROGRAM?** \_\_\_\_\_