

DELTON KELLOGG SCHOOLS ATHLETIC HANDBOOK FORM

STUDENT: _____,
 Last Name **First Name** **Middle Initial**

Address _____
 Number/Street **City** **Zip Code**

Birth Date _____ **Anticipated Year of Graduation** _____

Mother/Guardian _____ **Father/Guardian** _____

Home Number _____

Work Number _____

Cell Number _____

Email Address _____

Additional Emergency Contacts:

Name: _____ **Relationship:** _____

Numbers: H _____ /W _____ /C _____

Name: _____ **Relationship:** _____

Numbers: H _____ /W _____ /C _____

We, the undersigned hereby acknowledge that we have been informed of the responsibilities of student-athletes of Delton Kellogg Schools. We have either accessed the information on the Delton Kellogg Schools web site, or we have seen the Athletic Handbook. We further acknowledge the importance of the above referenced information, and accept the terms set forth, including the consequences explained.

Signature of Student: _____

Signature of Parent/Guardian: _____