

TOTAL ENCLOSED:

2021 GREAT NORTHERN ELITE PLAYER INFORMATION FORM

THIS FORM MUST BE TURNED IN AT TRYOUTS - ALONG WITH TRYOUT REGISTRATION FORM, TRYOUT FEE, & COPY OF BIRTH CIRTIFICATE

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	PLAYER IN	NFO
LAST NAME: FIRST NAME:		
GRADE (2020-21): D	OB:	CELL NUMBER:
SCHOOL:	HEIGHT:	POSITION(S):
20-21 H.S. TEAM LEVEL (IF APPLICABLE	E):	PREFERRED #'S: I I
	YL YXL MS MW YL YXL MS MM	ML MXL MXXL WS WM WL WXL ML MXL MXXL WS WM WL WXL ML MXL MXXL WS WM WL WXL
PARENT/GUARDIAN INFO		
LAST NAME:	FIRST	NAME:
RELATIONSHIP:		
CELL NUMBER:	EMAIL:	
ADDRESS:		
CITY:	STATE:	ZIP:
EMERGENCY CONTACT INFO		
LAST NAME:	FIRST	NAME:
RELATIONSHIP:		
CELL NUMBER:	WORK N	IUMBER:
ADDRESS:		
CITY:	STATE:	ZIP:
	PROGRAM	
2021 12U-14U PLAYER FEE: TBD		2021 15U-17U PLAYER FEE: TBD
2021 PLAYER FEES COVER UNIFORM, SHORT SLEEVE TOP, LONG SLEEVE TOP, TOURNAMENT FEES, GYM RENTAL FEES, & COACHING FEES		
	SIGNATUI	RES
I UNDERSTAND THAT I AM EXPECTED AS A PARENT/GUARDIAN TO CONDUCT MYSELF IN A CIVIL MANNER AT ALL GREAT NORTHERN ELITE EVENTS. FAILURE TO DO SO WILL RESULT IN EXPULSION FROM THE PROGRAM.		
PLAYER SIGNATURE:		DATE:
PARENT/GUARDIAN SIGNATURE:		DATE: