

Student Name: _____ Grade Entering: _____

Phone #: _____

Athletic Department Questionnaire For New/Returning Students

HIGH SCHOOL

FALL

- (Boys) Football
- (Girls) Volleyball
- (Boys) Soccer
- (Girls) Golf
- (Coed) Cross Country
- Cheer*

WINTER

- (Boys) Basketball
- (Girls) Basketball
- Wrestling
- Ski/Snowboard
- Colorguard

SPRING

- (Boys) Baseball
- (Girls) Softball
- (Coed) Track
- (Girls) Soccer
- (Boys) Golf
- (Coed) Tennis
- (Boys) Volleyball
- (Coed)Swimming/Diving

MIDDLE SCHOOL

FALL

- (Girls) Volleyball
- (Boys) Soccer
- (Boys) Tackle Football
- Cheer*

EARLY WINTER

- (Boys) Basketball
- (Girls) Soccer

LATE WINTER

- (Coed) Wrestling
- (Girls) Basketball

SPRING

- (Coed) Track

* Cheer tryouts in Spring of previous year – MS Cheer continues through Early Winter, HS Cheer continues through Winter season.

1. Did you participate in school sports last year? Yes _____ No _____

If so, what school? _____

2. What sport(s)? _____, _____, _____

3. Date of completed application to our school: _____

Any questions about eligibility please call the Athletic Office: 856-5618 ext. 6

GO COUGARS

CCS School Office: Please return this form to the Athletic Department