



Arc Athlete Information 2020
PLEASE COMPLETE ALL SECTIONS

Name: _____

Address: _____

Phone Number: _____

Parent/Guardian Name: _____

Parent/Guardian Phone Number: _____

May we add these numbers to our TextCaster system to send out practice alerts? YES NO

Would you like to add alerts for:

BASKETBALL CHEERLEADING VOLLEYBALL BOWLING TRACK SOFTBALL SOCCER PROGRAMS

Email: _____

Who is your ISC or Case Manager? _____

Shirt Size: _____

Short Size: _____

Below (For Office Use Only)

___ Current physical (expires 2020)

___ Arc Rules signed

___ Application for Participation

___ Definition of Eligibility