

# LIGHTNING SPIKES TRACK CLUB

## APPLICATION

### General Information

Athlete's Name: \_\_\_\_\_ Gender: M / F Birth Date: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_\_\_

circle

Parents Name: Mother: \_\_\_\_\_ Father: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_ / \_\_\_\_\_  
cell / home cell / home

Primary Contact Number: \_\_\_\_\_ (calling post)

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ GPA: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ / \_\_\_\_\_  
primary secondary

### Emergency Contact Information

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

### Medical Information

Doctor/Clinic: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Medical Concerns: \_\_\_\_\_

Current Medication: \_\_\_\_\_

### Athlete's Profile

Three things that interest you about Track and Field:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Best Track Event: \_\_\_\_\_

Best Track Accomplishment: \_\_\_\_\_