

CHARMS Registration Form

New Registration \_\_\_\_\_ Already Register \_\_\_\_\_ (Enter Student Name & Sport/Activity & Any Changes)

Student First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

Student Email \_\_\_\_\_ Grade \_\_\_\_\_

Cell Phone \_\_\_\_\_ Cell Phone Carrier \_\_\_\_\_ Male / Female

Parent Name \_\_\_\_\_

Parent Email \_\_\_\_\_ Cell Phone & Carrier \_\_\_\_\_

Parent Name \_\_\_\_\_

Parent Email \_\_\_\_\_ Cell Phone & Carrier \_\_\_\_\_

Student Sports / Activities involved in \_\_\_\_\_