



Cross Prep

Registration

Athlete's Name:

Grade:

Parent/Guardian's Name:

Street:

City, Postal Code:

Phone (Cell or Home):

Email:

Program Dates:

Tuesday September 25th, October 2nd & 9th : 5:30 - 7pm

Sunday September 30th, October 7th & 14th: 2 - 3:30pm

Office use	Fee:	Payment:	Form:	Date:
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