

**SPORTS-ATHLETE INFORMATION CARD**  
CENTENNIAL HIGH SCHOOL ATHLETICS DEPARTMENT

Name \_\_\_\_\_ Grade \_\_\_\_\_  
Last First Middle  
Student Number \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Birthday \_\_\_\_\_ Age \_\_\_\_\_

Parent or Guardian Name \_\_\_\_\_

School Attended Last Year \_\_\_\_\_  
Name of School City State

Number of Years at Centennial High School (Counting This One) 1 2 3 4

Number of Courses Enrolled in This Semester \_\_\_\_\_

Number of Courses Enrolled in Last Semester \_\_\_\_\_

Name of Course(s) You Failed Last Semester \_\_\_\_\_

Sport You Are Participating In \_\_\_\_\_

Signature of Athlete \_\_\_\_\_