

Semiahmoo Secondary School
Semiahmoo Athletics
Player Information Form

Team (Name and Grade Level ie. Gr 8/Jr/Sr): _____

Player Name: _____ Uniform # & Size: _____

Student #: _____ Grade: _____ Age: _____

Home Address:

Parent(s) Name:

Home Phone: _____ Parent Cell: _____

Player Cell: _____

Player email: _____

Parent(s) email: _____ and _____

BC School Sports Registration Information: (please print)

Name (last, first, middle initial): ie. Smith, Rachel, J.

Gender (M/F/X) : _____

Grade: _____

Birth date (DD / MM / YYYY) ie. 16 / 04 / 1998: _____

Year you entered grade 8: _____