



NLR Catholic Academy SPORTS REGISTRATION FOR YEAR 2021/2022



Child's Name: _____ DOB: _____ Sex: (M / F) Grade: _____

Address: _____

Parents/Guardian: _____
(First & Last Name Please)

Home Phone #: _____ Dad's Work #: _____ Cell #: _____
 Mom's Work #: _____ Cell #: _____
 Guardian's Work #: _____ Cell #: _____

In case of Emergency: Name: _____ Phone #: _____

My child will be playing the following sports: Please **MARK** appropriate sport/s.
Athletic Fees are due at time of registration and payable to: NLR Catholic Academy Athletic Fund.

Single Child

\$50.00 Per Initial Sport Per Child
\$10.00 For Each Additional Sport

Family (Multiple Children)

\$60.00 Per Family With More Than One Child Initial Sport
\$10.00 For Each Additional Sport Per Child Per Family

Volleyball _____
 Basketball _____
 Track & Field _____
 Cross Country _____

Total Paid: _____

Not Played At NLRCA School:
Football At CHS

(Please fill out additional registration sheets for each child)

I hereby give my permission for my child/children to participate in NLR Catholic Academy Sports Program.

I agree as a parent of a child/children participating in **ALL SPORTS** to work **(example: Concession stand; gate; scoring; cleanup; etc.)** during the times when my child's team will be playing in our **"Home' gym**. I understand I/We will be scheduled to work at times when my child/children are out playing, so I/We will be able to watch their games.

 (Parent/Guardian Signature)

 (Date)