



CYO Cross Country 2019 Registration Form

Youth Name: _____

T-shirt size (Circle One): Youth S, Youth M, Youth L, Youth XL, Adult S, Adult M

Mailing Address: _____

Parent(s) Name(s): _____

Parent's Email: _____

Family Parish: _____

Parent Cell: _____ Alternate Phone: _____

Youth Date of Birth: _____ Youth Age (**as of 8/31/19**): _____

Youth Gender (circle one): M or F Grade in 2019-20: _____

Note: Age groups are 8U (1 mile race), 11U (2 mile race), and 14U (2 mile race)

- Qualifying age is participant's age on August 31, 2018
- There is a boys race and a girls race for each age group

Please note that your registration is an agreement to: (please initial)

- Youth will regularly attend practices _____
- Youth will attend *at least* two meets _____

A registration fee of \$75 must accompany this registration (checks payable to SABB)

**** \$55 of this registration fee is non-refundable after 8/31/19****

Parent Signature: _____

Youth Signature: _____