



# MLCHS CROSS COUNTRY 2019

## Athlete Information Form (AIF)

Name: \_\_\_\_\_

Athlete's Cell Phone # : \_\_\_\_\_

Athlete's Email: \_\_\_\_\_

Contact (parent or guardian) Name: \_\_\_\_\_

Contact's Cell & Home Phone #s: \_\_\_\_\_(c)\_\_\_\_\_ (h)

Contact's Email: \_\_\_\_\_

Class in Fall (Circle One): FR SO JR SR Team (Circle One): Boys Girls

Personal Records (Your best times):

800 \_\_\_\_\_ 1600 \_\_\_\_\_ Other \_\_\_\_\_

3200 \_\_\_\_\_ 5K \_\_\_\_\_ 10K \_\_\_\_\_

Why do you want to run XC? Parents want me to run  Enjoy XC  Stay in shape /  
general fitness  Aerobic base for track  Conditioning for main sport  Sport \_\_\_\_\_  
Enjoy the camaraderie  Other reason \_\_\_\_\_

TShirt Size (Circle One): XS S M L XL XXL

*Personal* goals for the season:

\_\_\_\_\_  
\_\_\_\_\_

What should our *team* goal be?: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Date of last physical: \_\_\_\_\_

Is it on file with MLCHS Athletics? Y or N