

Student Information Form

(Purple Form)

Student Name:			_
	DOB:		



Address:	Grade:	
(Street)		
(City, State, Zip)	Shop:	
Home Phone:	Cell Phone:	
Email Address:	Twitter:	
Parent 1 Name:	Relationship:	
Parent 1 EMail:	Parent 1 Phone:	
Parent 2 Name:	Relationship:	
Parent 2 EMail:	Parent 2 Phone:	
Athletic Info- Have you Played sports prior to coming to J. M. Wrigh	t Tech? (Circle) YES NO	
What Sports have you played? (Please list)		
What Teams/Clubs have you played for? (Please list)		
Do you currently play for any teams/clubs outside of J. M. Wright Tech? (Please list)		
Who are your sport influences? Why do you play sport	es?	
Favorite Teams/ Sports/ Athletes?		
Do You Want to Play a Sport in College? (Circle) Please List any Colleges that interest you?	'ES NO	