



CEA Kernersville Athlete Information Card

2019-2020

Athlete First Name: _____ Athlete Last Name: _____
Athlete Cell Phone Number: _____ Athlete Date of Birth: _____
Athlete Email Address: _____ Athlete Age as of 8/31/19 _____
Parent Name: _____ Parent Cell Number: _____
Parent Email Address: _____

Are you new to CEA Kernersville? Yes No If yes, name of Gym _____
Did you try out at another CEA Location? Yes No If yes, where? _____
Do you wish to be considered for two teams? Yes No
Are you interested in becoming a Host Family? Yes No
Are you interested in becoming a Team Parent? Yes No

Filled by Ofc: _____
Registration: _____ Amt: _____ Form of Payment: _____ Draft Form: _____ Information Page: _____ Cof C: _____



CEA Kernersville Athlete Information Card

2019-2020

Athlete First Name: _____ Athlete Last Name: _____
Athlete Cell Phone Number: _____ Athlete Date of Birth: _____
Athlete Email Address: _____ Athlete Age as of 8/31/19 _____
Parent Name: _____ Parent Cell Number: _____
Parent Email Address: _____

Are you new to CEA Kernersville? Yes No If yes, name of Gym _____
Did you try out at another CEA Location? Yes No If yes, where? _____
Do you wish to be considered for two teams? Yes No
Are you interested in becoming a Host Family? Yes No
Are you interested in becoming a Team Parent? Yes No

Filled by Ofc: _____
Registration: _____ Amt: _____ Form of Payment: _____ Draft Form: _____ Information Page: _____ Cof C: _____