

## JPII CROSS COUNTRY REGISTRATION FORM

Student Name: \_\_\_\_\_ Grade \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number where you will be available during practice: \_\_\_\_\_

Email: \_\_\_\_\_

Persons allowed to pick up your child(ren):

Name	Relation to student	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

### Please indicate Pick Up Procedure

My Child(ren) will be picked by car at 3:00pm \_\_\_\_\_

My child(ren) will be going to Aftercare at 3:00pm \_\_\_\_\_

- Practice runs from 2:00-3:00pm.
- Students must bring water bottle.

**\$25.00 Registration fee due with paperwork. Please send in cash or check payable to St. John Paul II School.**

**Please turn in Registration to the St. John Paul II School office**