



# Giant Skillz Athletics

**“Committed to doing it better.”**

## ATHLETE REGISTRATION FORM

Athlete's Full Name: \_\_\_\_\_

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

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

Athlete's School: \_\_\_\_\_

Athlete's Graduation Year: \_\_\_\_\_

Position: \_\_\_\_\_

Parent/Legal Guardian Name: \_\_\_\_\_

Parent/Legal Guardian Cell # &/or Email: \_\_\_\_\_