

## **Membership Application**



**MEMBERSHIP:** \$20.00 family membership

Please be sure to list the Name(s) and Sport(s) for ALL athletes!

(PLEASE PRINT)

List ALL sports this student intends to participate in at LSHS during this  ATHLETE #2 - NAME:	ATHLETE #1 - NAME		GRADE:	_ M	F
List ALL sports this student intends to participate is in at LSHS during  ATHLETE #3 - NAME:					
ATHLETE #3 - NAME:	ATHLETE #2 - NAME		GRADE:	_ M	F
List ALL sports this student intends to participate in at LSHS during this  Parent(s)/Guardian Name(s):  Address:	List ALL sports this	student intends to participate is in at LSHS	during this school	ol year.	
Phone #:	ATHLETE #3 - NAME:		GRADE:	_ M	F
Parent(s)/Guardian Name(s):	List ALL sports this	student intends to participate in at LSHS de	uring this school	year.	
Phone #:Email address:  ATTENTION: SENIORS interested in applying for the Booster Club Scholar MUST BE a member of the Booster Club in good standing.  PLEASE MAKE CHECKS PAYABLE TO: "LSHS AE					_
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MUST BE a member of the Booster Club in good standing.  PLEASE MAKE CHECKS PAYABLE TO: "LSHS AE	Phone #:	Email address:			_
Amount Paid: \$ Paid by:	MUST BE a member of	the Booster Club in good standing.	·	ne Sprin	g
Cash Credit Card	•	•	Che	eck #	

"Enhancing the Student experience through Athletics" 03/2020