

Spring 2017 Application

Southwest High School Ultimate Frisbee Club (MÜS)

PLEASE PRINT CLEARLY

Student Name (First) _____ (Last) _____

USA Ultimate Membership # _____ School ID # _____

Student's Email _____

Student's Phone (cell) _____ (Home) _____

Address _____

Desired Jersey # Choice: 1st ___ 2nd ___ 3rd ___ Size ___ Birth Date _____ Grade ___

I have read the team charter, the MnSHSL rules that apply to the club and USA Ultimate's 11th edition of the game rules which are all available on the club's school web site. I understand and agree to follow them.

STUDENT Signature _____ Date _____

PARENT or GUARDIAN INFORMATION

Name _____ Phone _____

Email _____

Name _____ Phone _____

Email _____

I give my child, _____, permission to participate in MÜS club activities. I also give permission to the club and its officers to use photographs and video of my child to promote the club and its activities in a positive manner. I also understand transportation is not provided by the school and may be provided by coaches, boosters, parents, or student drivers. I give permission to be added to MÜS Team Snap account for communications.

Parent / Guardian Signature _____ Date _____