Getting To Know Your Athlete Information Sheet

Childs Name:	Nickname:
Siblings (names & ages):	
Who lives at home with the athlete: _	
Other significant people in your child'	's life that they may talk about or relate to:
Pets (Name and kind of animal):	
Athlete's Likes:	
Athletes Dislikes:	
I would really like to see my athlete in	nprove in the area(s) of:
Things the coaches should know abou	nt your athlete:
Any information that will help us buil	t a relationship and work with your child:

