

2007-2008 Girls' Indoor Track Signup

{Please print clearly.}

Name: _____

Address: _____

ZIP CODE _____

Phone# _____

Emergency Phone# _____

E-Mail: _____

YOG: 2011 2010 2009 2008 (circle one)

TEAM STATUS: FIRST TIME TEAM MEMBER _____ RETURNING TEAM VETERAN _____

*******TEAR HERE** *******TEAR HERE*******

Signup Checklist of WHAT, WHEN and HOW

to become a Lexington Indoor Track Team Member.

DUE by

- | | | |
|---|------------|--------|
| 1. I HAVE A VALID PHYSICAL ON RECORD WITH THE SCHOOL NURSE DATED AFTER 11/26/06? | DONE _____ | 26-Nov |
| 2. MY INDOOR PARENT PERMISSION FORM IS COMPLETE AND HAS BEEN TURNED IN TO THE LEXINGTON AD? | DONE _____ | 26-Nov |
| 3. I HAVE REVIEWED TEAM EXPECTATIONS AND AM READY TO COMMIT MYSELF AS A TEAM MEMBER. | DONE _____ | 30-Nov |
| 4. I HAVE SHARED TEAM EXPECTATIONS WITH MY PARENTS. THEY SUPPORT MY COMMITMENT TO THE TEAM. | DONE _____ | 30-Nov |
| 5. WE HAVE SIGNED THE TEAM EXPECTATION CONTRACT AND I HAVE TURNED IT IN TO COACH CROSBY. | DONE _____ | 30-Nov |
| 6. I HAVE COMPLETED THE "USER FEE" PROCESS, HAVE PAID THE FEE OR SUBMITTED A WAIVER. | DONE _____ | 7-Dec |

You are invited to participate as a team member during the week of Nov. 26-30 when 1 and 2 have been completed.

You are a full, "bona fide", team member without conditions when 1 through 6 have been completed.

ONLY "bona fide" TEAM MEMBERS CAN COMPETE AND CONTINUE TO PRACTICE AFTER 12/07/2007

All forms, team schedules, meet schedules and team expectations available at (<http://www.mlxctrack.com/lexgirls.html>)

> Coach Crosby: phillipcrosby@yahoo.com 978-772-9424 (home) 781-588-2743 (cell for emergencies)

> Coach Buckus: Room _____ at LHS lbuckus@sch.ci.lexington.ma.us