Santa Clarita Track Club's

Students Off And Running (SOAR)

Pre Season Participant Survey 2016-2017



Name:	School:
Age:	Birthdate:
Gender:	Ethnicity:
Home Address:	Cell Phone:
	Email:
	Shirt Size:
	Shoe Size:
Emergency Contact:	
,	tionship: Cell:
,	
Name: Rela	
Name: Rela	OAR? (circle all that apply)

Waivers Received

Program Participation	Physical Release
Parent Understanding	Guidelines