CYO ONLINE ROSTER ATHLETE DATA FORM The data below is needed for the on-line roster. Please collect this information from each participant. ATHLETE FIRST NAME **ATHLETE LAST NAME GUARDIAN ADDRESS GUARDIAN CITY GUARDIAN STATE GUARDIAN ZIP CODE GUARDIAN HOME PHONE GUARDIAN WORK PHONE GUARDIAN MOBILE PHONE WORK EXTENSION GUARDIAN EMAIL ATHLETE BIRTHDATE COUNTY OF RESIDENCE GENDER** □ Cuyahoga ☐ Lorain ■ Wayne ☐ Geauga ☐ Medina □ Other ☐ Summit □ Lake **ATHLETE GRADE RELIGION** □ Catholic □ Other **RACE** ATHLETE ELIGIBILITY (Please check) ☐ White/Caucasian **□**African American ☐ Member of Parish Sponsoring Team ☐ Asian/Pacific Islander □ Latino/Hispanic ☐ Enrolled in School Sponsoring Team ☐ American Indian/Eskimo/Aleutian ☐ Eligibility Request Form (ERF) Submission **□**Other ATHLETE PHYSICAL EXAM DATE ATHLETE SCHOOL **ATHLETE PARISH GUARDIANS NAME**