

Please do not use this space.
Class: ____ AA ____ A
Amt. Paid: _____

**LOUISIANA CHRISTIAN SCHOOL
ATHLETIC ASSOCIATION
Enrollment Form
2010-2011**

RETURN FORM TO: John Guidroz
220 Portland Avenue
Lafayette, LA 70507
Telephone: (337) 234-9860 Fax: (337) 233-3555

SCHOOL NAME: _____
ADDRESS: _____ **PHONE:** _____
CITY: _____ **ZIP CODE:** _____
ADMINISTRATOR: _____ **PHONE:** _____
ATHLETIC DIRECTOR: _____ **PHONE:** _____
GRADES OFFERED: _____ **NO. STUDENTS: (K-8)** _____ **(9-12)** _____
SCHOOL MASCOT: _____
SCHOOL COLORS: _____ **FAX:** _____
E-MAIL ADDRESS: _____

PLEASE CHECK THE SPORTS THE SCHOOL IS PARTICIPATING IN THIS YEAR

| | |
|--------------------------|---------------------------|
| ____ FOOTBALL | ____ GIRLS' VOLLEYBALL |
| ____ JV FOOTBALL | ____ JV GIRLS' VOLLEYBALL |
| ____ COED SOCCER | ____ GIRLS' BASKETBALL |
| ____ JV COED SOCCER | ____ JV GIRLS' BASKETBALL |
| ____ BOYS' BASKETBALL | ____ GIRLS' SOFTBALL |
| ____ JV BOYS' BASKETBALL | |
| ____ BOYS' BASEBALL | |

FEES: **MEMBERSHIP FEE (DUE EACH YEAR)** \$200.00
FORFEIT BOND \$100.00 (new members only)
VARSITY SPORTS ____ x \$175.00 _____
JV SPORTS ____ x \$150.00 _____
_____ (total amount due)

APPLICATION MUST BE SUBMITTED BY: AUGUST 12, 2010

LOUISIANA CHRISTIAN SCHOOL
ATHLETIC ASSOCIATION

ATHLETIC CONTRACT

This contract is drawn for a _____ contest
between _____ and _____.

The game is to be played at _____ on
_____ starting at _____ PM.

SPECIAL PROVISIONS ARE AS FOLLOWS:

SIGNED:

Principal

School

Coach

School

Principal

School

Coach

School