

Cupertino High School Cross Country 2018

Information Sheet

Name _____ Date _____

Email Id _____ Student ID # _____

Parents/Guardian Names _____

Parents/Guardians Email Ids _____

Address _____

City _____ Zip Code _____

Home Phone # _____ Your Cell Phone # _____

Emergency Phone # _____

Grade _____ Age _____ Birth date _____

Is your have 6th period free? _____ Is your 7th period free? _____

Do you drive? _____ Can you drive others? _____ How many? _____

Can your parent(s) drive to meets? _____ How many total? _____

Cross Country experience _____

If you ran cross country last year, what were your top three best races?

<u>Race</u>	<u>Distance</u>	<u>Time</u>
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Favorite race _____

What do you think you need to do to improve your times? _____

How many miles did you run this summer? Miles per week? What did you do? _____

Why are you trying out for cross country? _____

Have you had any past athletically relevant injuries or medical conditions? _____

If yes, what? _____

Do you have asthma? _____ Do you use an inhaler? _____

Do you have diabetes? _____ If yes, how often do you check your sugar? _____

Do you have any allergies? _____ If yes, what? _____

Do you have any current athletically relevant medical problems? _____

If yes, what? _____

Do you wear contacts? _____ If yes, do you wear them when you are doing sports? _____

Are you currently playing another sport? _____ If yes, what? _____

What is the practice schedule of the other sport? _____

Do you have any schedule conflicts with our practice times? _____

If yes, what? _____

Do you have any schedule conflicts with our meets? _____

If yes, what? _____

SCHEDULE: Subject Room Teacher

Period 1: _____

Period 2: _____

Period 3: _____

Period 4: _____

Period 5: _____

Period 6: _____

Period 7: _____

CHS _____ Middle College _____ Are you currently taking college courses? _____

Last Semester GPA: _____ High School Cum. GPA: _____

Did you take any classes this summer? _____ Where? _____

List **all** previous sport (physical) activities in your life: (include martial arts, ballet, dance, etc.)

<u>Sport/Activity</u>	<u>Number of year(s) or season(s) [dates]</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

List any hobbies, clubs, or other pursuits: _____

What are your realistic goals for this XC season? _____

What are your dream goals for this XC season? _____

What are your realistic goals for your CHS XC career? _____

What are your dream goals for your CHS XC career? _____

Comments? _____

Siblings & Ages: _____

Schools (List school name and dates of attendance):

Elementary: _____

Middle School: _____

High School: _____

Last updated 8/2/18