**Rockwood Summit Water Polo Athlete Information**

(Please Print)

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| **Name:** |  |
| **Address:** |  |
| **DOB:** | **Year in School:** |
| **# Year playing water polo:** |  |

**Contact Information:**

|  |  |  |
| --- | --- | --- |
|  | **e-mail** | **Phone:** |
| **Mom:** |  |  |
| **Dad:** |  |  |
| **Your:** |  |  |

**Other Sports, Clubs or Activities You Are Involved In:**

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**Classes Taking: Teacher: Grade:**

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**GPA:** \_\_\_\_\_\_\_\_\_  **Cumulative GPA:** \_\_\_\_\_\_\_\_

**Other Important Information Coaches Should Know:** (Medical, Personal or otherwise)

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