USBC Intercollegiate Team Championships

ATHLETE INFORMATION FORM

NAME _____

SCHOOL _____

BIRTHDATE _____

HOMETOWN _____

CLASS **Freshman** **Sophomore** **Junior** **Senior** **Graduate**
(Circle one)

MAJOR _____

RIGHT- / LEFT-HANDED **Right** **Left**
(Circle one)

E-MAIL ADDRESS _____

CELL PHONE NUMBER _____
(or phone easiest to reach you)

PERSONAL BIO **(List career highlights, other tidbits about yourself, etc.)**

_____

_____

_____

_____

_____

_____

_____

(use other side if more room needed)