



Holy Trinity Athletics – Parent Contact Form

***Please complete this form and return it to Mrs. Naleway immediately
Note Baseball Players have a special contact form – refer to the Baseball page**

Athlete's Name _____ Grade: _____

Parents: _____

Parent Home Phone # : _____

Parent Cell # : (_____) _____ mom / dad (circle)

Parent Cell # : (_____) _____ mom / dad (circle)

Parent Cell # : (_____) _____ mom / dad (circle)

Parent e-mail: _____ mom / dad (circle)

Parent e-mail: _____ mom / dad (circle)

Parent e-mail: _____ mom / dad (circle)

Please list any scheduling conflicts you may have during the season:

- _____
- _____
- _____