

DELAWARE MILITARY ACADEMY

ATHLETE PROFILE FORM

(The information that you provide below will be put on a team roster for the coaches and athletes and will be used for communicating information about DMA Sports boosters and the DMA Athletic program.)

Name: _____ Class of _____

Parents/Guardians Names: _____

Address: _____

Home Phone: _____

Athlete's Cell #: _____

Mother's Work #: _____

Mother's Cell #: _____

Father's Work #: _____

Father's Cell #: _____

Athlete's E-mail Address: _____

Mother's E-mail Address: _____

Father's E-mail Address: _____

Comments: Please indicate below with a checkmark which e-mail address you would like to be used as a primary contact.

_____ Athlete's

_____ Mother's

_____ Father's

_____ All

Athlete's/Parents Comments: _____
