

# Iowa City West High Bowling Athlete Information

(Please print legibly)

Grade: 9 10 11 12

Male / Female

School:

Name:

E-mail:

Address, City, Zip:

Phone Numbers Home

Cell:

Parents/Guardians: Name:

E-mail:

Cell:

Parents/Guardians: Name:

E-mail:

Cell:

Shirt size: S M L XL XXL

Do you have any physical condition that might limit your bowling?

Have you bowled before?

How much?

Do you bowl in league?

When?

Do you have your own ball? Brand/Model:

Wt:

Grip: conventional / fingertip

1)

2)

3)

Do you participate in any other sports or other school extracurricular activities?

If so, what?

Do you work?

What days and hours?

\*\*\*\*\* IMPORTANT\* \*\*\*\*\*

- You should have your permission to practice and physical exam forms completed and on file in the athletic office prior to the first practice. You can get them at the athletic office.
- All bowlers are expected to have their own ball, ball bag, and bowling shoes.
- Please send me an e-mail so that I can make sure that I have your correct address:

Head Coach Mike Mellecker

email [LM4377@sharontc.net](mailto:LM4377@sharontc.net)

cell 319-331-0345