

# LIBERTY UNIVERSITY TRACK & FIELD

## ATHLETE INFORMATION

Name:			Today's Date:		
Current address:					
City:		State:	ZIP Code:		Gender:
Date of birth:		SSN:		Phone:	
Height:	Weight:	Shoe Size:		Email:	
Parents:			Parents Occupation:		

## OTHER INFORMATION

High School:					
High School Address:				Phone:	
Coach:		Coach's Email:		Coach's Phone:	
Registered with the NCAA Clearing House: Y / N			Cleared the NCAA Clearing House: Y / N		
GPA:	Anticipated Major:		SAT/ACT:		Graduation Date:
Church:				Church Affiliation:	
Pastor:		Pastor's Email:		Pastor's Phone:	
Have you accepted Christ as your personal Savior?				When?	

## ATHLETIC BACKGROUND

Athletic Performances (list events, personal best times, second best times and distances)	
Freshman Year:	
Sophomore Year:	
Junior Year:	
Senior Year:	
College or other Track/XC honors:	
Serious athletic injuries:	
Notes:	

### RETURN TO:

Liberty University Track Office  
 1971 University Blvd  
 Lynchburg, VA 24502-8001

Phone: (434) 582-2135  
 Fax: (434) 582-2076  
 Email: track@liberty.edu



### FOR OFFICE USE ONLY:

Date Received: \_\_\_\_\_  
 Contact: \_\_\_\_\_  
 Admissions: \_\_\_\_\_  
 Brochure: \_\_\_\_\_  
 Letter: \_\_\_\_\_