

Nitehawks Sports Club

24 Blaisdell Drive

Carlisle, MA 01741

978.505.8318 / www.thenitehawks.org

Our athletes have Junior Olympic medals from the Association Meets, Region 1 Meets & from the Nationals!

Our athletes have achieved National Champion status, All-American status & National Honor Roles!

Our athletes have earned National Medals at the Youth National Athletic Games.

And, most importantly, our athletes have lots of fun!

2013-2014 Registration Form:

Coaches are USATF Trained & Certified

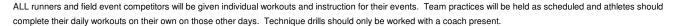
Please complete and return this form to the address shown, above.



Supporting kids from Acton, Boxborough, Concord, Carlisle, Lincoln, Sudbury, Bedford, Stow, Westford, Weston, Wayland, Groton, Shirley, Littleton, Chelmsford, Maynard, Ashland, Lexington, Arlington, Billerica, Burlington, Lunenberg, Hopkington and more!

Both GIRLS and BOYS!

Get your friends to join, too!



So, what are you waiting for? Just complete the form below and don't walk - run - to your nearest post office.

PLEASE SUPPORT THE CLUB BY SENDING IN YOUR REGISTRATION TODAY!

Name:					Use DOB:	on	e form fo	r each	athle	te reg	istere	d, please.
Address:					Grade:							(current)
					Gender:	: _	M	F				
Parent Name:					Phone:	_						
Parent Name:					Phone:	_						
e-mail address:					Uniform	ı Si	ize: YS	ΥM	YL	AS	AM	
Program Selection:												(circle one)
☐ Cross-Country Team	\$	90.00		all (SeptNo	v.)			دمراويهم	Lugar	1000	ı	
☐ Indoor Track Team	\$	120.00	\	Vinter (Dec	Mar.)	ı	THE PARTY	VA.	-			
☐ Outdoor Track Team	\$	170.00		Spring/Summ	er (AprJul.)	ı	10					
☐ ALL SEASONS	\$	350.00				ı		1000				
Select any one or two seasons or check the 'ALL SEASO Note: There is a maximum charge of \$950/family - Some							us MO	IGAN STAT		T		
INJURY WAIVER: I, my heirs, successors and/or assignees and other costs, including, but not limited to transportation at any activity associated with this club, it's affiliates, and any olimited to employees, coaches, trainers, managers, or any of	s, h ınd offic	ereby waive my rehabilitation, in ial associated w	right to	s a result of a	ny injury sus	tair	ned durin	g parti	cipati	on in		
I understand and acknowledge that the Nitehawks Sports Cluaforementioned activities. I hereby assume full responsibility				•				ection	with th	ne		
Signed:							Date:					
Please enclose your check for the full amount payable to	o N	itehawks SC w	ith this e	enrollment fo	orm.			_				