

# SC GRADUATING HIGH SCHOOL SENIORS ALL LEVELS

LEVEL (circle): 4 5 6 7 8 9 10 XCEL \_\_\_\_\_(level)

NAME \_\_\_\_\_

CLUB \_\_\_\_\_

NAME(S) OF COACH \_\_\_\_\_

NUMBER OF YEARS COMPETING \_\_\_\_\_

NUMBER OF TIMES COMPETED IN A REGIONAL MEET \_\_\_\_\_

EASTERNS or NATIONALS? \_\_\_\_\_

COLLEGE ATTENDING \_\_\_\_\_

ARE YOU COMPETING IN COLLEGE \_\_\_YES \_\_\_NO

WILL YOU ATTEND ON SCHOLARSHIP \_\_\_YES \_\_\_NO

TYPE OF SCHOLARSHIP:       ATHLETIC   ACADEMIC   OTHER \_\_\_\_\_

FULL   PARTIAL

PROBABLE/POSSIBLE MAJOR OR AREA OF INTEREST \_\_\_\_\_

NAME OF PARENTS

MOTHER \_\_\_\_\_

First

Last

FATHER \_\_\_\_\_

First

Last

AT EACH OF OUR STATE MEETS WE WILL HAVE A SPECIAL RECOGNITION FOR OUR GRADUATING SENIORS AND THEIR PARENTS. WE HOPE THAT YOUR PARENTS WILL BE ABLE TO JOIN US FOR THIS SPECIAL HONOR AND RECOGNITION.

Return to:     Dana Browy  
                  712 Braekel Court  
                  Lexington, SC 29072  
                  e-mail: danamorrisbrowy@gmail.com

**Deadline Date January 31<sup>st</sup>, 2019**