CHARLOTTE 49ER SOCCER

A PROUD MEMBER OF THE ATLANTIC 10 CONFERENCE

Internet

Player Information

Name:	Graduation Year:
Email:	Social Security Number:
Street Address:	Date of Birth:
City, State, Zip:	Cell Phone:
Home Phone:	Height: Weight:
Top 3 College Choices: 1. 2. 3.	

Parent Information

Name (Father):	Name (Mother):
Occupation:	Occupation:
College:	College:
Street Address: same as above ☐	Street Address: same as above ☐
City, State, Zip:	City, State, Zip:
Phone:	Phone:

Academic Information

High School Name:	SAT: Math: Verbal: Written:
High School Address:	ACT Composite Score:
City, State, Zip:	Class Rank:
School Phone:	Have you applied to Charlotte?
Guidance Counselor:	Are you registered with the NCAA Clearinghouse?
Guidance Counselor Phone:	What is your intended college major?

Club Soccer Information

Club Team:	Positions:	Number:
Coach's Name:	Phone:	Email:
Coach's Name:	Phone:	Email:
Attributes as a player:		
List upcoming tournaments:		

O.D.P

State Pool	State Team	Yrs.	Regional Pool	Regional Team	Yrs.
National Pool	National Team	Yrs.	Super Y League ODP:	State Regional	National
Coach's Name:		Phone:		Email:	
Coach's Name:		Phone:		Email:	

Misc.

Please return this questionnaire to:
Charlotte Men's Soccer
Wachovia Fieldhouse
9201 University City Blvd.
Charlotte, NC 28223