

Academics & Athletics Connection/LV Stars, Inc.

"Cultivating Today's Youth Into Tomorrow's Leaders"

James R. Wroten

1016 E. Rome Boulevard | N. Las Vegas, NV 89086 Cell: 702.677.6325 Fax: 702-331-9920



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\bowtie	aacinc1998@gmail.com
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REGISTRATION FORM

Player Information	n			
Player's Name:				
			Shirt Size:	
Positions:	Grade:	GPA:	Date of Birth:	
Current School:				
Parent/Guardian I	nformation			
Parent/Guardian N	Name:			
Address:				
City:	State	•	Zip Code:	
Home Phone:	Home Phone: Cell Phone:		Work Phone:	
Please Notify: Relationship to Stu	udent Athlete:			
			Work Phone:	
Release and Waive	er of Liability			
I,		acting on beha	If of myself or my minor child,	do
expressly and fore respective officers	ver release Academi , employees, agents	cs & Athletics Connect	ion/LV Stars, Inc. and all of the n any and all liability of injurie:	ir
Parent/Guardian S	Signature:		Date:	