



Senior Night Information

Name of Senior Athlete: _____
(Please include a phonetic spelling if your name if you believe it will be helpful)

Winter Sport: _____

Escorted By: _____ **relationship:** _____

Position(s) played (if applicable): _____

Number of years sport played at CHS: _____

Other CHS Sports or Clubs: _____

CHS Awards/Honors: _____

College/post-graduation considerations: _____

Area(s) of concentration/major in college: _____

Other Interests: _____

Favorite Class & teacher at CHS: _____

MOST MEMORABLE MOMENT WHILE PARTICIPATING IN THIS WINTER SPORT:

Please return this form to your coach by **Friday, Jan. 27th**