



**Hebron Hawks Cross Country and Track Booster Club
2007 Cross Country Membership Form**

Cross Country Athletic Fee \$65.00

Athlete(s) Name: _____ Grade _____

Athlete(s) phone: _____ Email _____

Athlete is _____ In _____ Not In _____ the Cross Country Class (please mark)

Parent / Guardian Name	Cell Phone	Work Phone	Email

Address: _____

City: _____ Zip _____

Home Phone _____

Membership Fee \$ _____

Donation to Booster Club \$ _____

TOTAL \$ _____

Method of Payment:

Cash ____

Check # _____

Date: _____

I would like to volunteer in the following areas:

CC Meets ____ Membership ____ Fundraising ____ Event Photos ____

Banquet ____ Tent ____ Stat Book ____ Video Prod ____

Website ____ Travel ____ Middle School CC Meets ____

I'll do anything! Just call me _____