

SEADO Enterprises
“A Sports and Information Referral Service”

SEADO Membership Registration Form

Annual Membership Fees: \$300 for Juniors & Seniors • \$100 for Freshman & Sophomores

All requested information must be completed for membership in the SEADO programs.
Please fax or mail the registration form to the SEADO Enterprises office.

Please print or type all information.

Contact Information

First Name: _____ MI: _____ Last Name: _____

Address: _____ Apt #: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Date of Birth (mm/dd/yyyy): _____ Email: _____

Academic Information

High School: _____ Phone: _____

Address: _____ City: _____

State: _____ Zip: _____ Principal Name: _____

GPA (4.0 scale): _____ Class Rank: _____ Graduation Year (yyyy): _____

Intended College Major: _____ College Minor: _____

Test Scores: PSAT: _____ SAT: _____ ACT: _____

Athletic Information

Weight: _____ Height: _____ Current Football Position: _____

Other Positions Played: _____

Coach First Name: _____ Coach Last Name: _____

Coach Phone: (____) _____ Coach Email: _____