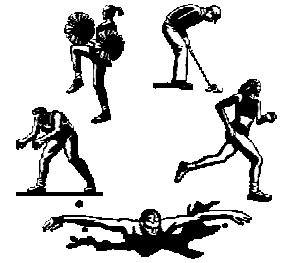




**Cypress Lakes Athletic Booster Club**  
PLEASE PRINT LEGIBLY!

Return to: Cypress Lakes Athletic Booster Club  
6037 Fry Road #126-88  
Katy, TX 77449



**Parent/Guardian Information: (Must be registered to vote)**

Last Name:		First Name(s)	
Address 1		Preferred Phone:	
Address 2		Alternate Phone:	
City - State		Email address 1:	
Zip Code		Email address 2:	

Contact information will be used only for club purposes.

**Student(s) Information:**

Last Name, First Name	Grade in 2011/2012	Sport(s) or Student Athletic Trainer

Please say YES! Mark the areas in which the Spartans can count on your support. These activities and services are ALL volunteer based and will not be available without our active participation.

<input type="checkbox"/>	Banquets	<input type="checkbox"/>	Concessions	<input type="checkbox"/>	Spirit Items
<input type="checkbox"/>	Publicity/Communication	<input type="checkbox"/>	Program committee	<input type="checkbox"/>	Fundraising
<input type="checkbox"/>	Sport representative*	<input type="checkbox"/>	Webmaster	<input type="checkbox"/>	Directory
<input type="checkbox"/>	Special events	<input type="checkbox"/>	Tournament support	<input type="checkbox"/>	Other*:

\*Please specify: \_\_\_\_\_

**Mark your membership choice and payment method:** (Gray area to be completed by Club representative)

	Fiscal year July 1-June 30	Amount Paid	Cash or Check #	Payment Rec'd By:	Date Received:
<input type="checkbox"/>	RED: \$25				
<input type="checkbox"/>	Or	<i>Please do not send cash unless paying in person. Make checks payable to CLABC.</i>			
<input type="checkbox"/>	SILVER (\$100+)				

Membership entitles the family of a currently enrolled athlete (or incoming freshman awaiting placement in athletics) to two adult votes to be cast at club meetings.

**THANKS FOR YOUR SUPPORT AND SPARTAN SPIRIT!**



\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**T**ogether **E**veryone **A**chieves **M**ore