

Varsity Shootout Registration Form

High School: _____ Mascot: _____

High School Address: _____

City/State/Zip: _____

Coach: _____

Coach's Address: _____

City/State/Zip: _____

Home Phone: _____ Cell Phone: _____

E-Mail Address: _____

Class (please circle one): A B C D

Make checks payable and mail to:

**Cornerstone University Sports Camps
1001 E. Beltline Ave. NE
Grand Rapids, MI 49525**

