



# COMPETITIVE EDGE SPORTS CHARLESTON

## ATHLETE REGISTRATION FORM

***PLEASE COMPLETE THIS FORM IN ADDITION TO THE RELEASE/WAIVER FORM AND  
BRING BOTH TO YOUR ATHLETE'S FIRST TRAINING SESSION***

Athlete Last Name: \_\_\_\_\_

Athlete First Name: \_\_\_\_\_

Parent or Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Sex: M / F Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Sports Played and Positions: \_\_\_\_\_

\_\_\_\_\_

---

\_\_\_\_\_ \$50.00 CES Charleston 6-month Membership Fee \*

*With a CES Charleston 6 month Membership, the following payment options are available:*

**Select your preferred payment option:**

\_\_\_\_\_ \$18.00 per session

\_\_\_\_\_ \$50.00 per week – 3 Sessions per week

\_\_\_\_\_ \$150.00 per month – 12 Sessions (Best Value - Save \$66!)

*\* CES 6-month Membership fee is required to participate in training with CES. Session fees are charged in addition to membership fee.*

**Please make checks payable to "CES Charleston"**