

ENTER YOUR INFO TO START THE APPLICATION PROCESS

STUDENT-ATHLETE PROFILE

***REQUIRED FIELD**

FIRST NAME* LAST NAME*

GENDER*

EMAIL*

PHONE*

STREET ADDRESS*

CITY* STATE* ZIP CODE*

SPORT*

GRADUATION YEAR*

PARENT/GUARDIAN PROFILE

***REQUIRED FIELD**

FIRST NAME* LAST NAME*

EMAIL*

PHONE*

OUR ACADEMIC CURRICULUM INCLUDES:

-English

-Fine Arts

-Art

-Mathematics

-Technology

-Home Economics

-History

-Spanish

-Speech

-Science

-French

-Music

-Health Science

-Woodshop

-Marine Biology

***Once the form is filled, save it and send it as an attachment to advisor@saddlebackacademy.com.**

***Please be prepared to submit two (2) character recommendations for each student athlete. Please email signed recommendations to advisor@saddlebackacademy.com.**