



# WISCONSIN WOMEN'S TENNIS

1440 Monroe Street | Madison, WI 53711 | UWBADGERS.COM

Phone: (608) 263-6304 | Fax: (608) 263-7849

## PERSONAL

Name \_\_\_\_\_ Date \_\_\_\_\_  
 Home Phone ( ) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Right or Left Handed \_\_\_\_\_ Email Address \_\_\_\_\_  
 Parents' or Guardians' Names \_\_\_\_\_  
 Father's Occupation \_\_\_\_\_ Mother's Occupation \_\_\_\_\_  
 College (if any) Parents or Guardians Attended \_\_\_\_\_

## ACADEMIC

High School \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Guidance Counselor \_\_\_\_\_ Date of Graduation \_\_\_\_\_  
 S.A.T. Scores: Verbal \_\_\_\_\_ Math \_\_\_\_\_ Date \_\_\_\_\_ A.C.T. Score: \_\_\_\_\_ Date \_\_\_\_\_  
 Grade Point Average \_\_\_\_\_ Class Rank \_\_\_\_\_ of \_\_\_\_\_ Intended Major \_\_\_\_\_  
 List other sports and extracurricular activities in which you participate:  
 \_\_\_\_\_  
 \_\_\_\_\_

## TENNIS INFORMATION

Coach's Name \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_  
 Home Phone ( ) \_\_\_\_\_ Office Phone ( ) \_\_\_\_\_

Ranking Last Year	Singles	Doubles	Age Division	Year
Sectional	_____	_____	_____	_____
National	_____	_____	_____	_____

## OTHER

If you had your choice today, which 5 schools do you think you would visit? Please list in order of your preference with No. 1 being your top choice. 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_ 5. \_\_\_\_\_

What goals do you have athletically and academically? \_\_\_\_\_  
 \_\_\_\_\_

Persons you would consult with in making a decision about the college you attend \_\_\_\_\_

List your favorite hobbies 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Mail questionnaire to head coach Brian Fleishman, [bef@athletics.wisc.edu](mailto:bef@athletics.wisc.edu)