

**COUGAR CLUB APPLICATION**  
**(please print and mail with check)**

Family Name \_\_\_\_\_ First Name (adult 1) \_\_\_\_\_ First Name (adult 2) \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Season Pass Only \_\_\_\_\_

Select Level: Red \_\_\_\_\_ White \_\_\_\_\_ Blue \_\_\_\_\_

Keffer Stadium Seat Choice – Please refer to Keffer Stadium Seating Chart on  
[gocougars.org](http://gocougars.org)

1 <sup>st</sup> Choice	2 <sup>nd</sup> Choice
Section _____	Section _____
Row _____	Row _____
Seat 1 _____	Seat 1 _____
Seat 2 _____	Seat 2 _____

**Please make checks payable to CCHSAA**

**Mail applications on or after June 1st to:**

Dolores Bullard  
5412 Piper Glen Drive  
Charlotte, NC 28277

Questions: Please email to [bullarddz1@aol.com](mailto:bullarddz1@aol.com) no phone calls please.