RosterRecharge Athlete Orientation

Complete the following tasks in this order then have your Parent/Guardian sign it:

	 □ Watch the intro video on RechargeAutoPilot.com □ Write the name of your Teammate Accountability Partner:																		
				•					•										
														4:					
	-			-					nplete As	-									
	 □ Day 2: Go to RechargeAutoPilot.com and complete Assignment #2 – time sensitive □ Day 3: Go to RechargeAutoPilot.com and complete Assignment #3 – time sensitive 																		
	□ Day 4 : Go to RechargeAutoPilot.com and complete Assignment #4 – <i>time sensitive</i>																		
All prospe	All prospective accountability partners need to be approved by a parent or guardian before phone or in person meetings are scheduled.																		
A parent	A parent or guardian needs to be present during all phone or in person communications with accountability partner. I, the parent or guardian of the child (athlete), herby give my approval for their RosterRecharge participation. I also agree to RosterRecharge's privacy policy and																		
											Recharge	partic	ipation. I	also ag	ree to Ro	sterRech	arge's priv	acy poli	cy and
terms of s	service	tound a	it http://v	vww.ros	terrech	arge.co	om/term	ns_ot_s	service.htr	mI.									
Parent/Guardian Name: Athlete Name:																			
1 al Cli	7101100 1441101																		
Paren	t/Gu	ardia	ın Sia	natui	re:				Date:										
·																			
	AP SHEET 1 - Prospective Accountability Partners List																		
<u>Athlet</u>	e's F	amily	v. Rela	ative:	s and	l Fan	nily F	rien	<u>ıds</u>										
1.									Roles:		D	ate: _	/		_ Time	:	T:		_ AC: □
2.									Roles:		D	ate: _	/		_ Time	:	T:		_ AC: □
3.									Roles:		D	ate: _	/		_ Time	:	T:		AC: □
4.									Roles:		D	ate: _	/		_ Time	:	T:		AC: □
5.									Roles:		D	ate: _	/		_ Time	:	T:		AC: □
6.									Roles:		D	ate: _	/		_ Time	:	T:		AC: □
																			AC: □
													-						AC: □
																			AC: □
																	full <u>AP</u>		
											_		a						
					Al	P SH	EET 2	2 - A(ccount	abilit	y Part	ner S	Sign-U	Jp Sho	eet				
First	& La	st Na	me	A	В	С	D		E		F/B/S	S/G	LB	SB	TS		Accou	ınt Er	nail
					<u> </u>														
				1	<u> </u>														
				1	<u> </u>														
				1															
	Con	tinue	on a	separ	ate s	heet	of pa	per o	r go to	Rech	argeAı	ıtoPi	lot.cor	n to p	rint of	f a full	AP SH	EET 2	<u>, </u>