Basketball Registration & Evaluation Form

Participant Information:

First Name			MI Last	Name
Gender	Grade		Church (If you regularly attend church, which o	ne?)
Date of Birth	/ Month	/ Day Year	How many years has your child played this s	port? What is your child participating in:
Notes:				🗆 Basketball 🛛 Cheer

Participant's Parent/Guardian Information:

 Father/Guardian 						
Address			City		State	Zip
Home Ph.	Mobile	Ph.	E	imail		
I would like to assist this leagu	ue by being a:	□ Coach	□ Referee	□ Assistant Coach	Shirt Size: □ AS □ A2	□ AM □ AL □ AXL 2XL □ A3XL
Mother/Guardian						
Address			City		State	Zip
Home Ph.	Mobile	Ph.	E	imail		
I would like to assist this leagu	ue by being a:	□ Coach	□ Referee	□ Assistant Coach		□ AM □ AL □ AXL 2XL □ A3XL

Emergency Contact Email					Mobile Ph.	
Practice Preferences						
If applicable, please indicate one night your child CANNOT practice:	MON	TUE	WED	THU	FRI	

Carpool Link (only same age/grade and gender) (other player must also list your child as their carpool link):

Sizing:	Evaluations (coaches use only):
Jersey Size: YXS YS YM YL AS AM AL AXL A2XL T-shirt Size: YXS YS YM YL AS AM AL AXL A2XL	Lane Defensive Shooting Movement
Short Size:	Layups Right-Hand Dribble
Cheer Top Size:	Form Left-Hand
Mock Turtleneck Size: □ YXS □ YS □ YM □ YL □ AS □ AM □ AL □ AXL □ A2XL	Shooting Dribble
Cheer Skort Size:	-

Items Purchased

Office Use Only:

Date:

Payment Type: