

Youth Basketball League  
2009-2010  
Player Registration Form

Office Use Only: Date Paid: _____ Amount: _____ Initials: _____
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Program Fees: Family: \$65 General: \$75 Participant: \$110

<b>Name</b>				
<b>Address</b>	Street	City	State	Zip
<b>Telephone</b>	Home			
<b>Name of Parents or Guardian</b>	Name		Phone	
<b>Email Address</b>	(used for league information updates)			
<b>Emergency Contact</b>	Name		Phone	
<b>Date of Birth</b>	Age as of January 1, 2010			
<b>T-Shirt Size (Circle One)</b>	<u>Youth:</u>	Small	Medium	Large
	<u>Adult:</u>	Small	Medium	Large
				X-Large

**SPECIAL REQUESTS**

In the space below, please note days of the week that your child **CANNOT** practice. In addition, please note and children that you would like to be matched up with.  
Every effort will be made to fit these accommodations, however, nothing is guaranteed.


**PARENT'S AGREEMENT**

1. I hereby attest the \_\_\_\_\_ is in normal health and is capable of participating safely in YBL.
2. I am aware of the goals and objectives of YBL which is based upon fun, fair play, teamwork and sportsmanship.
3. We, as a family, are willing to participate as actively as possible in the YBL program.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**YES, I WOULD LOVE TO VOLUNTEER (check all the apply)**

____ Bake Sale	____ Banquet	____ Coach	____ Asst. Coach	____ Referee
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For more information on the Youth Basketball League, contact Doug Carrier at 978-686-6191