

Credit Card Number



BASKETBALL REGISTRATION FORM

Child's Name:		School:				
Address:						
City:				Zip Code:		
Grade Level:	el:Birthdate:			Male	Female	
Phone:		Email:				
Select T-Shirt Size:	☐Youth S	☐ Youth M	☐Yout	h L Ad	lult S	
	SPECIA	AL REQUE	STS			
Special requests/restric We will do the best we	tion (i.e. choice o	of coach, teamr	nates, prac	• ,		
	C	OACHING	I			
Is Parent/Guardian will	ing to be a Head	Coach?	Yes	☐ No		
Name:			Phone:			
Email:			Shirt	Shirt size:		
If Coaching, do you ha	ve a preferred te	am name/color	?			
ls Parent/Guardian will	ing to be an Assi	stant Coach?	Yes	☐ No		
Name:			Phon	Phone:		
mail:		Shirt	Shirt size:			
Participants/Guests assume all risk of in facilities, or his or her participation in the hereby for himself or herself, his or her l Rec Center/Kids Fit Foundation and its	activities of The Ivy League neirs, executors and adminis	Rec Center/Kids Fit Foundations waive, release and	dation, on or about agree to hold free t	the premises or at and from all claims for dam	other location and does	
Signature of Adult Participa	ant/Parent/Guardiar	1		Date		

Expiration Date

CVV