

HOW DO I SIGN UP?

BRING OR MAIL REGISTRATION FORM AND FEE TO:

First Baptist Leeds-Leeds AL

7481 Parkway Dr.
Leeds, AL 35094

For both basketball and cheerleading bring to registration form and \$70 fee to Evaluation.

REGISTRATION INFORMATION:

The registration cost per child for **basketball** is **\$70**.
The registration cost per child for **cheerleading** is **\$70**.
Basketball shorts are **included** at no additional cost.
Cheerleading mock turtle-necks are **included** at no additional cost.

EVALUATIONS AND ORIENTATIONS:

Everyone **must** attend one basketball evaluation or cheerleading orientation. They will take place at the **FBC Leeds Gym** as follows:

Basketball and Cheerleading
Monday, October 19, between 6:00 p.m. and 8:00 p.m.
Tuesday, October 20, between 6:00 p.m. and 8:00 p.m.
Monday, October 26, between 6:00 p.m. and 8:00 p.m.
Tuesday, October 27, between 6:00 p.m. and 8:00 p.m.

PROGRAM SCHEDULE:

Everything located in the FBC Leeds Gym!
First Practice - The Week of Monday, November 16, 2020
First Game - Saturday, January 9, 2021
Season Celebration - Saturday, February 27, 2021

FOR MORE INFORMATION:

FBC Leeds
205-699-6141
For basketball - sweems@fbcleeds.org
For cheerleading - fbcleedsupwardcheer@gmail.com

UPWARD
SPORTS

20/21

**UPWARD BASKETBALL AND
CHEERLEADING REGISTRATION FORM**

PARTICIPANT CONTACT INFO: I AM REGISTERING MY CHILD FOR: BASKETBALL CHEERLEADING

Last Name _____ First Name _____ MI _____ Would you be willing to coach your child's team?
 Yes No
Gender _____ Grade (20-21 school year) _____ Date of Birth _____ / ____ / ____
Month Day Year
If yes, please print your name: _____
Address _____ Carpool Link (only same age/grade and gender)
(other player must also list your child as their carpool link)
City _____ State _____ Zip _____
Home Phone () _____ Parent's Cell () _____
Church (if you regularly attend church, which one?) _____ How many years has your child played organized Basketball? _____
Participant Information Notes (if any) _____
If applicable, circle **ONE** night your child **CANNOT** practice. **MON TUE THU FRI**

PARENT/GUARDIAN INFORMATION:

Father/Guardian _____ Home Phone () _____ Cell Phone () _____
Email _____
I would like to assist this league by being a: Coach Referee Team Parent
Mother/Guardian _____ Home Phone () _____ Cell Phone () _____
Email _____
I would like to assist this league by being a: Coach Referee Team Parent
Emergency Contact _____ Daytime Phone () _____ Evening Phone () _____

SIZING: (COMPLETED AT EVALUATIONS/ORIENTATIONS)

Basketball Jersey/Cheer Top Size (circle one):
YXS YS YM YL YXL/AS AM AL AXL A2X
Basketball Shorts Size (circle one):
YXS YS YM YL YXL/AS AM AL AXL A2X
Cheer Skort Size (circle one):
YXS YS YM YL YXL/AS AM AL AXL A2X
Cheer Mock Turtle-neck Size (circle one):
YXS YS YM YL YXL/AS AM AL AXL A2X

EVALUATIONS: (COACHES USE ONLY)

Lane Shooting _____ Right-Side Shot _____
Left-Side Shot _____ Defensive Slide _____
Right Hand Dribble _____ Left Hand Dribble _____
Height - in inches _____

PAYMENT: Participant Fee : \$ _____

OFFICE USE ONLY			
DATE	PAYMENT TYPE	AMOUNT	NOTE
_____	_____	_____	_____

Cut here and keep