

20-21 Basketball & Cheerleading Registration & Evaluation Form



Participant Information:

Last Name First Name MI

Gender Grade Church (If you regularly attend church, which one?)
(20-21 School year)

Date of Birth / / How many years has your child played this sport?
Month Day Year

NOTES:

Participant's Parent/Guardian Information:

■ Father/Guardian

Address City State Zip

Home Ph. Mobile Ph. Email

I would like to assist this league by being a: Coach Referee Assistant Coach

■ Mother/Guardian

Address City State Zip

Home Ph. Mobile Ph. Email

I would like to assist this league by being a: Coach Referee Assistant Coach

■ Emergency Contact

Email Mobile Ph.

Practice Preferences:

If applicable, check **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:

■ Cheer Top Size:

YXS YS YM YL AS
 AM AL AXL A2XL

■ Mock Turtleneck Size:

YXS YS YM YL AS
 AM AL AXL A2XL

■ Cheer Skort Size:

YXS YS YM YL AS
 AM AL AXL A2XL

Items Purchased:

Office Use Only:

Date: Payment Type: Amount Paid: Note: