

# ST. PAUL PARISH CYO BASKETBALL PLAYER REGISTRATION FORM

## PLAYER INFORMATION (PLEASE PRINT)

PLAYER'S NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOME #: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_ WORK #: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ CELL #: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ CELL #: \_\_\_\_\_

## EMERGENCY CONTACTS (PLEASE PRINT)

FIRST SECOND

NAME: \_\_\_\_\_ NAME: \_\_\_\_\_

PHONE#: \_\_\_\_\_ PHONE#: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

## MEDICAL HISTORY (PLEASE PRINT)

1. OPERATIONS OR SERIOUS INJURIES  
(DATES): \_\_\_\_\_

2. CHRONIC OR RECURRING ILLNESS:  
\_\_\_\_\_

3. DOES YOUR CHILD HAVE ASTHMA?  
\_\_\_\_\_

4. WHAT MEDICATION (IF ANY) IS YOUR CHILD TAKING?  
\_\_\_\_\_

## PHYSICIAN INFORMATION (PLEASE PRINT)

PHYSICIAN NAME: \_\_\_\_\_ PHONE#: \_\_\_\_\_

INSURANCE CARRIER: \_\_\_\_\_

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

## UNIFORM INFORMATION (PLEASE CIRCLE ONE OF THE FOLLOWING OPTIONS )

WE DO NOT NEED A NEW UNIFORM. LAST YEARS JERSEY NUMBER IS : \_\_\_\_\_

OR

WE NEED A NEW UNIFORM THIS YEAR ( SPECIFY SIZE : YOUTH S,M,L,XL, or. ADULT S, M, L, XL )

SHIRT SIZE: \_\_\_\_\_

SHORT SIZE: \_\_\_\_\_

## ST. PAUL CYO BASKETBALL

CYO BASKETBALL SEASON IS ALMOST HERE! IT IS OPEN TO 3<sup>RD</sup> THROUGH 8<sup>TH</sup> GRADE BOYS AND GIRLS WHO RECEIVE FAITH FORMATION AT ST. PAUL PARISH. CYO IS A COMPETITIVE, TRAVEL, BASKETBALL LEAGUE THAT COMPETES WITH AS MANY AS 7 OTHER NEW JERSEY PARISHES IN THE BERGEN COUNTY CYO LEAGUE.

SINCE THIS IS A COMPETITIVE LEAGUE, EVALUATIONS FOR OLDER PLAYERS MAY BE NECESSARY AS TEAMS CAN ONLY SUPPORT A MAXIMUM OF 12 PLAYERS; THESE EVALUATIONS WILL BE HELD SOMETIME IN LATE OCTOBER. PRACTICES WILL BEGIN IN NOVEMBER WITH GAMES BEGINNING IN EARLY DECEMBER AND RUN THROUGH THE END OF FEBRUARY. LEAGUE PLAYOFFS ARE IN EARLY MARCH.

**COACHES ARE ALWAYS NEEDED.** IF INTERESTED, PLEASE CONTACT JOE LYNCH AT JoeLynchCYO@stpaulrcchurch.org OR call 914-325-2473.

### CYO BASKETBALL FEES

1 <sup>ST</sup> PLAYER	\$170
2 <sup>ND</sup> PLAYER (SIBLING)	\$130
3 <sup>RD</sup> PLAYER (SIBLING)	\$105

UNIFORMS ( Youth; S,M,L,XL OR ADULT; S,M,L,XL )

SHORTS & SHIRTS	\$65
SHORTS ONLY	\$30
SHIRTS ONLY	\$40

MAKE CHECKS PAYABLE TO ST. PAUL RC CHURCH (PLEASE ATTACH WITH ALL REGISTRATION FORMS) AND DROP THEM OFF AT THE PARISH CENTER BY SATURDAY OCT 20<sup>TH</sup>.

### Drop off checklist:

**Signed Code of Conduct Agreement**

**Signed Consent Form and Liability Waiver**

**Registration Form with all information complete**

**Check made out to St Paul RC Church**