Player Registration Form

Registration Fee: $35.00

Circle the Sport you are Registering For:

Soccer Basketball Swim League Tennis Golf

Boys Cal Ripkin (12&under) Boys BabeRuth (13-15) Girls Softball (15&under)

Birthdate:_____**Sex (circle one)**: Male or Female **Age**:_____

Last Name:_____**First**:_____**MI**:_____

Preferred Name:_____

Address:_____**City**:_____**State**:_____**Zip**:_____

Home Phone:_____**Cell Phone**:_____**Other**:_____

School:_____**Grade**:_____**Shirt Size (players only):** Youth-S, M, L Adult-S, M,L,XL,2X

Mother's Information: (if applicable)

Last Name:_____First:_____

Home Phone:_____Cell Phone:_____Work:_____

Email Address:_____

Father's Information: (if applicable)

Last Name:_____First:_____

Home Phone:_____Cell Phone:_____Work:_____

Email Address:_____

Emergency Contact (other than parent):_____Phone:_____

Note any Medical Issues or Allergies:_____

Drivers License # **(Checks Only)**:_____

You may NOT request a specific coach, or for your child to be on another child's team, unless they are siblings or live in the SAME household.
NO EXCEPTIONS!

Parent/Guardian Signature:_____Date:_____