



# REGISTRATION FORM

Player Name \_\_\_\_\_  
First Last

Parent/Guardian Name \_\_\_\_\_  
First Last

I am interested in coaching  YES  NO

Address \_\_\_\_\_  
Street Address

\_\_\_\_\_ City State

\_\_\_\_\_ Zip code

Phone Number \_\_\_\_\_  
Area Code Phone Number

Email Address \_\_\_\_\_

Gender  BOY  GIRL

Age/Grade \_\_\_\_\_  
Age Grade

Jersey Size  YS  YM  YL  YXL |  AM  AL  AXL  AXX

Emergency Contact Name \_\_\_\_\_  
First/Last Phone Number

Cash \_\_\_\_\_  
Amount

Credit Card Information \_\_\_\_\_  
Number Exp

\_\_\_\_\_ CVV Amount

Check Payment \_\_\_\_\_  
Check payable to

\_\_\_\_\_ Check Number Check Amount

PAYMENT INFORMATION