

**Prince of Peace Catholic Church**  
**Diocese of Charleston**  
**Youth Basketball Registration - 2019/2020**

Date: \_\_\_\_\_

<b>Player Information:</b> (Please print legibly)	
<b>Player's Name:</b>	
Address:	
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth:	
Age as of Sept. 1, 2019	
School/Grade:	
Shirt / Jersey Size:	XS S M L XL (Adult: L XL XXL)
<b>Parent / Legal Guardian Information:</b>	
<b>Mother's Full Name:</b>	
Mother's primary number:	
<b>Father's Full Name:</b>	
Father's Primary number:	
<b>Legal Guardian's Full Name:</b>	
Legal Guardian's Primary Number:	
<b>Email Address Information - for program information and updates:</b>	
Primary Contact Email Address #1:	
Are you willing to assist as a coach/assistant coach?	<input type="checkbox"/> Coach <input type="checkbox"/> Assistant Coach

<b>Payment Information:</b>	
Check Number:	Amount:
Name on Check if different than Player(s):	
<b>Players included in payment: \$75 each</b>	

1.	4.
2.	5.
3.	6.

\*No refunds will be given after 11/1/19 unless the player has made a school team. \*

I hereby state that my child is covered by \_\_\_\_\_ insurance policy. Group Number \_\_\_\_\_ I also hereby release Prince of Peace, The Diocese of Charleston, Church League Basketball for Youth, (CLBBY) and/or GDUMRA, Breakaway Sports, and United Methodist Church, all coaches, and participating churches of any responsibility in the case of an accident that might occur to my child while participating in any League related activities. I understand that in the event of an accident that would require emergency treatment, every effort will be made reach me. If I cannot be reached, I give my permission to the responsible coaches and/or CLBBY and/or GDUMRA personnel to secure medical attention for my child.

\_\_\_\_\_  
**Signature** \_\_\_\_\_  
**Date**

Emergency Contact Name:	
Emergency Phone:	
Relationship to Player:	

**Parent’s Sportsmanship Agreement:**

I understand that by signing this registration form, I have received copies of the Player’s and Parent’s Code of Conduct sheets, and that I agree to abide by the Code of Conduct rules. Failure to do so, may result in my child being dropped from the team.

\_\_\_\_\_  
**Parent’s Signature:**

Comments/situations that should be considered by your child’s coach or POP Program Coordinators:

DEADLINE: October 27, 2019

Admin. Use Only: