

POPE JOHN MIDDLE SCHOOL/REV BROWN



BASKETBALL REGISTRATION FORM

I give permission for my child (print name) and grade level _____
to participate in the Pope John Middle School Youth Basketball program.

Please send payment **\$75.00** (exact cash or check made payable to PJMS) with this permission form. If paying by check, please memo: **PJMS Youth Basketball Registration**

Special instructions for my child:

Emergency contact:

Name:

Phone:

Email:

By signing this form, I agree to the Player and Parent Code of Conduct, team and league rules and concussion protocol. All paperwork is to be returned and fees paid prior to participation in the basketball program. Please return all forms to school attention: Mr. Bello, Vice Principal PJMS or Mr. Rosanelli Vice Principal RB

Parent/Guardian signature

Date

Please indicate uniform size (please circle one for each)

Jersey/tee-shirt: YS YM YL AS AM AL

Shorts: YS YM YL AS AM AL