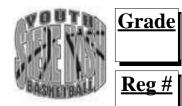


Prince George Minor Basketball



Reg#

Registration 2017/2018

Player's Name:		Phone	e #:	
Address:				
City:		Postal Cod	Postal Code:	
Gender:		Birth Date	Birth Date:	
Age:		Grade:	Grade:	
Height:			Weight:	
Parent / Guardian Name:		Differen	Different phone #'s if possible	
Father:		Phone	Phone #:	
Mother:			Phone #:	
	ress:			
•		n could be of concern	Please state NONE if no concerns	
Family Physician:	Personal Health #:			
•		Average Abov	ve Average	
*	e in Minor Basket	•	Please provide a	
-	ct: (other than parents		Piease proviae a lifferent # than above	
Name:		Phone	Phone #:	
Would you be inte Additional Informa	rested in coaching ation	?	aching?	
Are you currently: basketball?	•	er sport that may inte	rfere with	
I hereby give my	authorization to a	allow		
		ram for the 2017/201	18 season:	
X	•		guardian signature)	
	Lagger		guaruian signature)	
Doy Cirl	League U		Dim	
Boy Girl	Previous Player As	Smt: Attitude Skill Level	Div:	
Notes:				
Shirt Size: You	X-Small Small	all Medium Large	X-Large	
Ad			_	
		Cook		
Amount Paid	by Cheque	Cash		