Shoreline Breakers Basketball 2018-2019

Registration Form

PLEASE RETURN WITH A \$50 PER PLAYER / \$150 FOR FAMILIES WITH 3 OR MORE PLAYERS BY SEPTEMBER 1, 2018. THIS IS NON-REFUNDABLE REGISTRATION FEE. A \$25 LATE FEE WILL BE ADDED AFTER SEPTEMBER 1.

Returning Player? Yes/No
Player Name:
Birth Date:
Age on September 1, 2018
Parent Name(s):
Address:
City/State/Zip Code:
Home Phone#
Parent's Cell #
Parent's Email:
Player's Email (Optional):
Emergency Contact:
Phone Number:
Doctor's Name:
Insurance Co.
Policy #
Are there any medical conditions we should be aware of?

2018-2019 SEASON COMMITMENT

My child,	, has my permission to participate on the Shoreline
Breakers Basketball team. I will not hold the	eir staff or volunteers responsible in case of accident
or injury. I authorize the supervising adult to	seek any necessary emergency medical treatment if
I cannot be reached.	
also agree to pay the fees required for our form. Basketball is a team sport and joining our child is on time for practices and game	play on the Shoreline Breakers Basketball team. We child's participation as outlined in this registration a team is a commitment, as such we will ensure that es. In the event our child cannot be present we will and coaching staff by notify the coach as soon as
Parent/Guardian Signature Parent/Guardian S	Signature
court, for practice or a game. I will respe instruction and my full commitment to wor respect my teammates and opponents both i Breakers I will work to exhibit Christ-like be	agree to bring my best effort each time I take the ct the coach and give my full attention to his/her k, to learn, and execute all that I am taught. I will n victory and defeat. As a member of the Shoreline havior with my words, my attitude, and my dealings a players. Basketball is a team sport and successfully respective.
Player's Signature of Commitment	

All registration forms and payments can be sent to:

Sarah Nicholls 19035 Sioux Drive Spring Lake, MI 49456

Phone number: (616) 490-0271