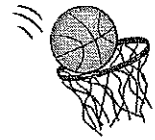


Town of Chester Basketball Registration



Player Information:

Player Name: _____ Phone: _____

Address: _____

Birth Date: _____ Grade: _____ Gender: Male or Female

Any medical concerns? _____

Shirt Size: YS YM YL AS AM AL AXL AXXL

• Parents are required to do one of the following:

____ Coach ____ Asst. Coach ____ Referee ____ Clean-Up

____ Score Keeper ____ Time Keeper ____ Team Parent

Parent Name: _____ Phone: _____

Parent Signature: _____ Cell: _____

Emergency Contact: _____

Registration Fee:

<u>Grade</u>		<u>Cost Per Child</u>
Girls / Boys	Grades 1-4	\$50.00
Girls / Boys	Grade 5-9	\$50.00

Please make checks payable to: Town of Chester.

CASH WILL NOT BE ACCEPTED