



# BASKETBALL TEAM REGISTRATION FORM

## CHECKLIST PRIOR TO JOIN LEAGUE:

- \_\_\_ Completed Team Registration Form
- \_\_\_ Complete Team Roster & Liability Form
- \_\_\_ Deposit Paid in Full
- \_\_\_ Sports Passport or Full Club Membership

Team Name: \_\_\_\_\_ Sponsor: \_\_\_\_\_  
 Team Manager: \_\_\_\_\_ Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip: \_\_\_\_\_ Ph.#: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Email: \_\_\_\_\_

### Please check one:

- Returning Team (NAME: \_\_\_\_\_)
- New Team

### Please Check One:

- Monday Women's C
- Wednesday Men's B
- Sunday Men's C

### PAYMENT

- League Fee..... **\$595**
- \$150 Deposit (Collected with Registration) ..... - \$ \_\_\_\_\_
- \$50 off League Fee for Returning Team ..... - \$ \_\_\_\_\_
- \$15 off League Fee for a Full Club Member ..... **-\$15x** \_\_\_\_\_ = - \$ \_\_\_\_\_
- \$25 Late Registration Fee..... \$ \_\_\_\_\_
- \$50 off League Fee if League Fee is paid in Full before 1<sup>st</sup> game ..... - \$ \_\_\_\_\_

**TOTAL COLLECTED:** \_\_\_\_\_

**TOTAL STILL DUE BY ( \_\_\_\_\_ ): \_\_\_\_\_**

DATE

**Form of Payment:** CASH CHECK VISA MASTERCARD

Checks returned for lack of funds or credit card denied will disqualify the team from the program.

Credit Card #: \_\_\_\_\_ Exp: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_



# BASKETBALL INDIVIDUAL REGISTRATION FORM

**CHECKLIST PRIOR TO JOIN LEAGUE:**

\_\_\_ Completed Team Registration Form

\_\_\_ Complete Team Roster & Liability Form

\_\_\_ Deposit Paid in Full

\_\_\_ Sports Passport or Full Club Membership

Player Name: \_\_\_\_\_

Team Manager: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Ph.#: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

**Please Check One:**

Monday Women's C

Wednesday Men's B

Sunday Men's C

## **PAYMENT**

- League Fee..... **\$595**
- \$35 Deposit (Collected with Registration) ..... - \$ \_\_\_\_\_
- \$10 off League Fee for being a Full Club ..... - \$ \_\_\_\_\_

**TOTAL COLLECTED:** \_\_\_\_\_

**TOTAL STILL DUE BY ( \_\_\_\_\_ ): \_\_\_\_\_**

DATE

**Form of Payment:** CASH CHECK VISA MASTERCARD

Checks returned for lack of funds or credit card denied will disqualify the team from the program.

Credit Card #: \_\_\_\_\_ Exp: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

