Corpus Christi School **Basketball Registration 2016-2017**

Please return this completed registration by October 20, 2016 to the school office - Attention Athletic Department if your child will be trying out for a 2016-2017 basketball team. Cuts may be made at the varsity level depending upon numbers. (Registration will not be accepted after November 1st)

JV = 5th & 6th graders Varsity = 7th & 8th graders Child's Name: Gender: Male/ Female Address: ______ Town: Zip: Grade: _____ East/ West Teacher: _____ Date of Birth: Parent/Guardian 1 Name: Relationship: Parent/Guardian 1 home phone _____ Cell phone _____ Parent/Guardian 1 Contact Email: Additional Parent/Guardian Information (if needed) Parent/Guardian 2 Name: Relationship: Parent/Guardian 2 home phone _____ Cell phone Parent/Guardian 2 Contact Email: ______

- Registration Fee = \$175.00 per player for Varsity and JV teams
 - Checks will not be deposited until teams have been decided **Checks payable to: Corpus Christi School**

Basketball will begin in November

(Medical Forms will be distributed once registration has been submitted)

 Medical Participation Form will need to be signed by a physician for participation prior to practice.

	For Office Use Only			
Revised 09/24/2015	Medical Form Completed	Paid	Ck#	

Revised 09/24/2015