

Saint Philip AME Church

Youth Basketball 2022 Registration Form

Please type or print information clearly. Return your completed registration form, a copy of your child's birth certificate, a recent picture and your registration fee. Please make checks payable to Saint Philip Church!

I am entering my child into the 5&6 co-ed; 7&8 co-ed; 9&10 Boys; 11&12 Boys; 13&14 Boys Age Division (Circle One).

Player's Name _____

Age on October 1, 2022 _____ Birth Date _____

School _____ Grade _____ Sex _____

Uniform Size: Youth S M L Adult S M L XL XXL XXXL

Parent/Guardian Name _____

Mailing Address _____

Home # _____ Work # _____

Cell # _____

Email _____

Physical Restrictions/Disabilities _____

Physicians Name _____

Physicians Phone # _____ Policy # _____

Insurance Company _____

Parent Registration Agreement

- There is a \$115 donation to participate in the Saint Philip Basketball Program. The uniform, and league fees are included in the \$115 donation. If you have your uniform from last season the donation is \$70.
- Donation, birth certificate, and recent picture are required at the time of registration. Donations must be received on or before October 25, 2022. No refund once uniform is ordered.
- Parent/Guardian signature agrees to indemnify and hold harmless Saint Philip AME Church, its Officers, Members, Administrative Staff, Employees, Ministerial Staff, Sponsors, Facility Owners and/or operators from claims, demands and judgments arising at any time your child/children are participating and/or traveling to participate with the Saint Philip Basketball Program. I understand that injuries do occur while participating in basketball practices and games. Further, I hereby grant full permission to presenters of this program to use any photograph, videotape, DVD recording, or any other record of events for any purpose.
- Parent/Guardian signature below attest your agreement to adhere to all the rules and regulations of the facilities events are held and that you have read this registration form and grant full permission for your child/children to participate in the Saint Philip AME Church Basketball Program.

Parent/Guardian Signature _____

Date ____/____/____

Saint Philip Church, 240 Candler Road SE, Atlanta, GA 30317