

# FULLY AIR CONDITIONED FACILITIES



## REGISTRATION FORM

1. Bring completed form to tryouts
2. \$25 tryout fee cash or check only
- \* Checks payable to "AMoney Sportz"
3. Copy of birth certificate

Parent's Name \_\_\_\_\_ Last \_\_\_\_\_

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Gender \_\_\_\_\_ Grade \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Playing Experience \_\_\_\_\_

Special Requests \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_

I hereby authorize the agents of AMoney Sportz to act for me according to his best judgement in any emergency situation requiring medical attention. I hereby release and discharge Amoney Sportz and its employees from and against any and all liability or causes of actions arising out of, or in connection with mine, or my child's participation in the program.

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Jersey # (returning player's only) \_\_\_\_\_