

**Penn Trafford Basketball Association
2010-2011 Season
Registration Form**

PTBA Use Only
Ck #: _____
Amount _____
Single child or Multi-child _____
If Multi: _____
Ck Location _____
Travel / School Team _____

Childs Name: _____ Date of Birth: _____

Grade (as of Sept. 2010): _____ School: _____

Address: _____ Phone: _____

_____ 2nd Phone: _____

Parent E-mail: _____ Player Height: _____

PLEASE COMPLETE THE FOLLOWING		
Gender	Grade Level	Fee Enclosed
<input type="checkbox"/> Boy	___ 3rd & 4th	\$90.00 One Child
	___ 5th & 6th	\$170.00 For Two _____
<input type="checkbox"/> Girl	___ 7th & 8th	\$250.00 For Three
	___ 9th & 10th	(\$80.00 For Each Additional Child)

UNIFORM SIZE (SHIRTS ONLY IN ALL AGE GROUPS)

Youth: ___ S ___ M ___ L ___ XL **Adult:** ___ S ___ M ___ L ___ XL ___ XXL

Parent / Guardian Name (Printed) _____
(First) (Last)

Parent / Guardian Signature: _____ Date: _____

**Please complete Release and Waiver of Liability and attach to this form.
Please make check payable to PTBA. Post-dated checks will not be accepted.**

I would like to coach or assist with a team this year in my child's age group. YES NO

If yes, please **fill out the Coaching Application/Background Check form.**
(Required for all coaches, assistants, & helpers.)

Name: _____ Phone: _____ Coach: _____ Assist: _____

****Will your child be trying out for a travel team this year. .** YES NO

If yes, please **fill out the Travel / Tournament sign up sheet and release form.**

****Please note their will be travel / tournament costs in addition to the above In House registration fees. The parents of the travel / tournament team players are responsible for these additional costs.**

Will your child be trying for the boys 7th, 8th, 9th or 10th grade school team. YES NO

If yes, and this is a second or more child please make a separate check. If your child makes the school team, you will be refunded that amount or your check will be returned to you. Please let PTBA know as soon as you know if he has made the team.

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