



HIDENWOOD PRESBYTERIAN CHURCH
2019 Church League Basketball Registration Form

Please fill out completely. Please print!

Player Information

Player's Name _____

Address: _____

Phone: _____

Email: _____

Date of Birth: _____

Age as of December 31, 2019: _____

Grade in School: _____

Returning player: Yes No

If yes, name of team returning to: _____

Parent/Guardian Information

Parent/Guardian: _____

Emergency Contact Number: _____

Parent/Guardian Email Address: _____

Parent/Guardian willing to: Coach Assistant Coach