

2022 HAWTHORNE YOUTH



BASKETBALL REGISTRATION FORM

CHILD SECTION (PLEASI	E INCLUDE ALL II	NFO)		Date:	
Last Name		First Name	M.I.	EMERGENCY CONTACT INFORMATION Please list all persons authorized to pick up your child. For your child's safety, he/she will not be released to anyone else.	
Birth date Si	Sex	Race	Height		·
					Relationship (W) Phone
School		Grade	Age		
Currently enrolled at Hav	wthorne for child	dcare? YES.	<u>/ ND</u>	(L) PNONE	Pager
Player's Shirt Size <mark>(</mark>	(CHOOSE ONLY	One)		Name	Relationship
					(W) Phone
SHIRT SIZE (YDUTH): S SHIRT SIZE (ADULT): S		L XL		(C) Phone	Pager
Parent Section				HEALTH DATA	
				Chronic or reoccurring illness or medial condition	
Parent/Guardian Name		Relat	tionship	Current medientions (send v	with instructions)
Home Address				PALLANI NISARATION /22119 M	/ITN INSTRUCTIONS/
·· - ··-				Allergies (please check all th	nat apply):
City		State	Zip	Hay Fever	
				Poison Ivy	
Home/Cell Phone	Email ((to send updates abou	ut the season)	Insect Sting	
Volunteer Section				Drugs / Medicati	tions
VULUNIEER ZECIIUN If you or someone you kr	now is interester	d in volunteering to co	aach or help run		
Saturday games please l				SCHEDULE REQUESTS / TIM Hawthorne will make every a	ME CONFLICTS attempt to honor your request but cannot guarantee
Name	<u> </u>	Relationship			
(H) Phone					
FOR ADMINSTR	RATIVE USE	ONLY			
PARTICIPATION FEES	S:			Client Stat Sheet compl	leted: YES/NO
Early Bird Registration 11/29 – 12/17 (\$45.00)*Youth is enrolled in childcare at Hawthorne (\$50.00)*Youth is not enrolled in childcare at Hawthorne (\$60.00)*				Total Fees Paid: YES / NO If NO then amount, if any, paid so far: Date paid:/	
*\$2.00 service fee when using debit/credit to pay				Authorized Signature:	
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