

# Family Information and Registration

Parent's Names \_\_\_\_\_

If you are a returning family and your family information is the same as last year please write "same" in the spaces below. If you are not sure that we have the information, please complete this form.

Address \_\_\_\_\_

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

## Phone Numbers

Home: \_\_\_\_\_

Mom's cell \_\_\_\_\_

Mom's work \_\_\_\_\_

Dad's cell \_\_\_\_\_

Dad's work \_\_\_\_\_

## Email address

Home \_\_\_\_\_

Mom's work \_\_\_\_\_

Dad's work \_\_\_\_\_

The Mustangs basketball program communicates to the participating families using email. If you do not have email access and need us to communicate to you in a different manner, please let us know how you would like us to communicate to you. \_\_\_\_\_

Registration fees are \$20.00 per player.

Please attach your check to BVCHEA Mustang Basketball for your registration fees. If you will fund raise for your registration fee, please sign below

I will fund-raise for my registration fees. Signed: \_\_\_\_\_ Dated: \_\_\_\_\_