



**Rookie League Registration Form** (\* Entries that MUST be filled in)

Last Name (player) \* \_\_\_\_\_

First Name (player) \* \_\_\_\_\_

Street Address \* \_\_\_\_\_

City \* \_\_\_\_\_

State \* \_\_\_\_\_

Zip Code \* \_\_\_\_\_

Phone Number \* \_\_\_\_\_

E-Mail (for confirmation) \* \_\_\_\_\_

Parent/Guardian \* \_\_\_\_\_

Parent/Guardian Phone(s) \* \_\_\_\_\_

School You Attend Name \* \_\_\_\_\_

Grade Right Now \* \_\_\_\_\_

T-Shirt Size \* (circle one)    YS    YM    YL    AS    AM    AY    AXL

Gender \* (circle one)    Male    Female

Volunteering \* (circle one)    Head Coach    Assistant Coach    Other Capacity    Sorry, I can't

Request for Sibling/Friend Same Team \_\_\_\_\_

Medical Conditions/Misc. Information \_\_\_\_\_

How Did You Hear of Us? (circle one)    Friend    Flyer    Newsletter    Website    Email

**I understand that registrations are not final until payment is received and a confirmation email is sent back to you. Please review our "Can I cancel out of my camp" question under FAQ.**

**When you register by US mail you MUST also include your league fee.**

**Send to: Bruce Owens | 8839 S. Circle E | Farwell, MI | 48622**

**Make checks out to: "Bruce Owens"**

**Thank you for registration with HOOP ZONE Rookie League!**

**See you in the gym,**

**HOOP-ZONE Basketball**

[www.hoopzonebasketball.com](http://www.hoopzonebasketball.com)