

Biddy Basketball Sign Up



**BOYS & GIRLS CLUB
OF TIPTON**



<u>Staff Use Only</u>
Amt. Paid _____
Date _____
Staff _____

Name of Player _____ Male/Female _____
Date of Birth _____ Age on November 7, 2009 _____
Address: _____ City: _____ Zip _____
Home Phone _____ Cell Phone: _____
School _____ Grade _____

Player Shirt Size (check one):

Youth Sizes: Small (6-8) _____ Medium (10-12) _____ Large (14-16) _____
Adult Sizes: Medium _____ Large _____ X-Large _____ XX-Large _____

List any medical conditions that we should be aware of: _____

The undersigned parent or guardian grants permission for his/her child to participate in the Boys & Girls Club of Tipton basketball program. As a parent/guardian of a member of the Boys & Girls Club of Tipton, the undersigned agrees to abide by the parent/guardian permission/consent form on the Club membership form.

Parent/guardian Signature

Date