



Trailblazer Basketball Registration Form 2018-2019

Due 7/31/18

Parents:

Address:

Father Email/Phone:

Preferred method of contact (circle one) Phone Email Text

Mother Email/Phone:

Preferred method of contact (circle one) Phone Email Text

REGISTRATION FEE: \$125 One Player, \$50 discount on each additional player

FUNDRAISING MINIMUM: \$150 One Player, \$300 two or more players

PLAYER

BIRTHDATE

GRADE

EMAIL/PHONE

1.

2.

3.

—— Initials: I verify that all players listed above meet the eligibility requirements for NCHBC and are at minimum 51% homeschooled.

—— Initials: I understand that playing on a team which is participating in the Middle Tennessee Athletic Conference requires a current membership in BRHSA and am certifying that our family is in good standing with BRHSA for the 2018-2019 school year.

—— Initials: I understand that all the information listed below is required for registration: Registration Form, Code of Conduct, Medical Waiver, Copy of Insurance Card, Sports Physical (to be provided before first practice), and Registration Fee.

AMT DUE: _____ AMT PD: _____ CHK# _____ CASH _____