



BASKETBALL REGISTRATION

Empire State Sports Council
641 Grooms Rd., Suite 190
Clifton Park, NY 12065
518-406-5478

Please fill out and send to The **Empire State Sports Council** at the above address with all registration fees. Registration deadline is June 15, 2018. Late registrations may be accepted if space available at the late registration rate of \$400/team. Multiple team discounts do not apply if registering late.

COACH INFORMATION

All correspondence will be to the coach, unless specified otherwise.

NAME: _____ PHONE: _____

ADDRESS: _____

EMAIL: _____

NAME OF TEAM: _____ GENDER: _____ TEAM AGE: _____

TEAM ROSTER

Athlete information will remain confidential and will not be sold.

1. NAME: _____ JERSEY NUMBER _____ DATE OF BIRTH: _____

EMERGENCY CONTACT: _____ EMAIL: _____

2. NAME: _____ JERSEY NUMBER _____ DATE OF BIRTH: _____

EMERGENCY CONTACT: _____ EMAIL: _____

3. NAME: _____ JERSEY NUMBER _____ DATE OF BIRTH: _____

EMERGENCY CONTACT: _____ EMAIL: _____

4. NAME: _____ JERSEY NUMBER _____ DATE OF BIRTH: _____

EMERGENCY CONTACT: _____ EMAIL: _____

5. NAME: _____ JERSEY NUMBER _____ DATE OF BIRTH: _____

EMERGENCY CONTACT: _____ EMAIL: _____

6. NAME: _____ JERSEY NUMBER _____ DATE OF BIRTH: _____

EMERGENCY CONTACT: _____ EMAIL: _____

7. NAME: _____ JERSEY NUMBER _____ DATE OF BIRTH: _____

EMERGENCY CONTACT: _____ EMAIL: _____

8. NAME: _____ JERSEY NUMBER _____ DATE OF BIRTH: _____

EMERGENCY CONTACT: _____ EMAIL: _____

9. NAME: _____ JERSEY NUMBER _____ DATE OF BIRTH: _____

EMERGENCY CONTACT: _____ EMAIL: _____

10. NAME: _____ JERSEY NUMBER _____ DATE OF BIRTH: _____

EMERGENCY CONTACT: _____ EMAIL: _____