

DYERSBURG ACTIVITY CENTER
BASKETBALL REGISTRATION
GIRLS & BOYS AGES 6-18(with school ID)
Website: <http://www.dyersburgtn.gov>

1010 Recreation Drive
Dyersburg, TN 38024
(731) 288-2564; Fax (731) 286-4894
Email: pholland@dyersburgtn.gov

NAME _____ AGE _____ DOB _____ Age on 1/01/2020 _____ M _____ F _____

HAVE YOU EVER PLAYED ANYWHERE _____ SEASONS PLAYED _____ SCHOOL _____ GRADE _____

NAME OF TEAM ON LAST YEAR? _____ WOULD YOU LIKE SAME COACH? _____

Do you have another child registered in this program? _____ Age _____ Name _____ Male _____ Female _____

SHIRT SIZE YOUTH SM MED LG XL ADULT SM MED LG XL

← Make sure you mark a size!

PARENT/GUARDIAN INFORMATION

MOTHER _____ FATHER _____

HOME ADDRESS _____ Email: _____

EMPLOYER (MOTHER) _____ EMPLOYER (FATHER) _____

MOTHER PHONE _____ FATHER PHONE _____

WOULD YOU LIKE TO COACH? _____ ASSIST. COACH? _____ OR BE A TEAM PARENT? _____

*****All volunteer coaches and assistants will be cleared through a criminal background check before being allowed to coach or assist.**

I the undersigned parent/guardian of: _____, do hereby consent and agree that the above named minor may participate in the Dyersburg Activity Center Basketball Association. It is agreed that the named association or sponsor assumes no legal liability or other loss as a result of such participation. It is further understood that the Dyersburg Activity Center Basketball Association has limited accident insurance to cover any injuries sustained while playing Basketball at or for the Dyersburg Activity Center Basketball Association under the supervision of a Dyersburg Activity Center Basketball Association staff member.

DATE _____ PARENT LEGAL GUARDIAN SIGNATURE _____

REGISTRATION FEE: \$15.00 ID FEE: \$10.00 AMOUNT PAID _____

CASH () CHECK () CK. # _____ ****REGISTRATION & ID FEES ARE NON-REFUNDABLE!!**

DATE PAID _____ EMPLOYEE _____ MEMBERSHIP ID# _____ DATE ID EXPIRES: _____