



2017-2018 CYO Basketball Registration (Closes 7/31/17)

Fee: \$160.00

Sweatshirt: _____

Total Amount: _____

Registration Fee: Paid Y N (Check No. _____ Cash _____)

Players who fail to return their uniforms at the end of the season will be required to pay \$45.00 for replacement.

Name: _____ Age: _____

Address: _____ Tel: _____

Email Address: _____

(please print clearly)

School: _____ Parish: _____ CCD Registration: Y N

Grade (as of Sept. 2017): _____ Birth Date: _____ Baptismal Certificate: Y N On File

Did you participate in 2016-2017 season: Y N

(If Yes, in which Parish: _____)

(Note: If you did not play in our program last year, you must submit a copy of your Birth and Baptismal Certificates even if already registered for in the St. Catherine's CCD program. Submit Baptismal Certificate at registration, email to Mark Langlois aspe26@optonline.net or mail to 8 Terrace Road, Boonton Twp., NJ 07005)

Parent(s) name(s) (Print): Mother _____ Father _____

Parent(s) signature: _____

Please indicate if you are interested in coaching: Y N

Through your signed permission you, and your child, make a commitment to our CYO Program and their Team. **REGULAR ATTENDANCE AT CCD CLASSES IS REQUIRED IN ORDER TO PARTICIPATE ON A CYO TEAM.**

Tee Shirt size (circle): YL AS AM AL AXL

St. Catherine Cougar hooded sweatshirts are available at the cost of \$45.00 per sweatshirt. If you wish to order, please note below the size and the name you wish imprinted on the sweatshirt. (NOTE: No orders will be taken after 9/30/17)

Size: _____ Name (to be embroidered on sweatshirt): _____

St. Catherine of Siena

10 North Pocono Road, Mountain Lakes, New Jersey 07046

AUTHORIZATION TO CONSENT TO MEDICAL TREATMENT OF A MINOR

I (We) _____

Address _____ Phone _____

Emergency Contact _____ Phone _____

Do hereby state that I am (we are) the parent(s) of _____
Age _____ Born ____/____/____

Who resides with me (us) at _____

I (WE) HEREBY GIVE MY (OUR) PERMISSION FOR ANY AND ALL MEDICAL ATTENTION NECESSARY TO BE ADMINISTERED TO MY CHILD IN THE EVENT OF AN ACCIDENT, INJURY, SICKNESS, ETC. UNDER THE DIRECTION OF THE PERSON(S) LISTED BELOW UNTIL SUCH TIME AS I MAY BE CONTACTED. THIS RELEASE IS EFFECTIVE FOR A PERIOD OF ONE YEAR FROM THE DATE GIVEN BELOW. I ALSO HEREBY ASSUME THE RESPONSIBILITY FOR PAYMENT OF ANY SUCH TREATMENT.

IN CASE I CANNOT BE REACHED, ANY OF THE FOLLOWING IS DESIGNATED TO ACT IN MY BEHALF: BASKETBALL COACH, ASSISTANT BASKETBALL COACH, A LEAGUE REPRESENTATIVE WHERE MY CHILD IS PLAYING, OR ANY TOURNAMENT REPRESENTATIVE WHERE MY CHILD IS PARTICIPATING IN A TOURNAMENT.

Date ____/____/17 Parent signature(s) _____

Existing medical problems _____

Current medicines _____

Allergies _____

Minor's Doctor _____ Phone ____ - ____ - ____

Insurance _____

Identification # _____ Group # _____

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2017-2018 CYO COUGARS BASKETBALL

WHO: Any girl or boy that is a member of St. Catherine's Parish, and in grade 4 through 8, may register for a Parish team.

FEE: A \$160.00 fee is charged to cover registration, equipment, gym time, referees and tournament fees. Checks are to be payable to "St. Catherine's CYO".

UNIFORMS: These will be provided by St. Catherine's and are to be returned cleaned to the Coach one week after the last game. Please follow washing instructions carefully to allow for maximum usage from year to year!

GAMES: Games are played on Sunday afternoons, either at home, in Mountain Lakes, or away at neighboring Parishes. In addition to the regular schedule, which runs from mid-November through the end of February, there may be pre-season and post-season tournament games. These schedules will be distributed at a later date. **ATTENDANCE AT ALL GAMES IS REQUIRED.**

PRACTICE: There will be weekly practices for each team. The days and times will be determined by the availability of the practice sites and the coaches. Monthly schedules will be handed out. Every team member is expected to attend all scheduled practices.

TEAMS: At this time, participation on a team is determined by Grade level as of September 2017. This is subject to change. If more than the allotted number of members for a team registers, then a selection process will be necessary. Team rosters will be finalized by 10/14/16 for the following:

JV Boys:	Grade 4 th , 5 th and 6 th
Varsity Boys:	Grade 7 th and 8 th
JV Girls:	Grade 4 th , 5 th and 6 th
Varsity Girls:	Grade 7 th and 8 th

Through your signed permission you, and your child, make a commitment to our CYO Program and their Team. **REGULAR ATTENDANCE AT CCD CLASSES IS REQUIRED IN ORDER TO PARTICIPATE ON A CYO TEAM.** We thank you in advance for your support, and look forward to another successful season!!

In-person registration dates (Church Hall)

Saturday 6/10/17 9:30 am to 11:00 am

Monday 6/12/17 6:00 pm to 7:30 pm

Saturday 6/17/17 1:00 pm to 2:30 pm