



[www.metro-parks.org](http://www.metro-parks.org)

## Metro Parks Athletics Basketball Team Registration Form

Name: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Team Name: \_\_\_\_\_ Shirt Color: \_\_\_\_\_

First Choice of League (Day & Location): \_\_\_\_\_

Second Choice of League (Day & Location): \_\_\_\_\_

**\*\*\*\*\*Office Use only\*\*\*\*\***

Check # \_\_\_\_\_ Name on Check: \_\_\_\_\_ Date: \_\_\_\_\_

Money Order # \_\_\_\_\_ Date: \_\_\_\_\_