***Basketball Registration Form***

**See Timeline Below**

**Dear Parents and Students of St. Margaret Mary School,**

The Athletic Department is currently coordinating our basketball teams for the 2017-18 winter season. The teams are open to both boys and girls in Grades 5-8. In general, games will be on Saturdays and occasionally Sundays from the beginning of December and ending at the end of February. Boys games will typically be played in the mornings and girls in the afternoons.

Practices are held twice a week at St. Margaret Mary School on school days following the completion of the school day. Practices last from 1-2 hours based on the coaches’ discretion and gym availability. Teams are coached by certified adults who are required to maintain certification as prescribed by the Archdiocese of Milwaukee.

Athletic participants are REQUIRED to have medical insurance and a physical examination. The exam is valid for two years.

***TIMELINE & REQUIREMENTS – NO EXCEPTIONS!***

* Registration form and fee due **October 15th**to Mr. Kleinhans
* To play you need to pay
* All other forms in this packet must be completed and returned prior to the first practice

Any questions can be directed to Mr. Kleinhans (Athletic Director) at 414-463-8760 ext. 130 or mkleinhans@stmms.org

**BASKETBALL REGISTRATION 2017-18 SEASON**

**November 2017 – February 2018**

**Please circle:** Boys Girls

**Please circle student’s grade level:** 5 6 7 8

**Please circle:** School Student Religious Education Student

**STUDENT NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ADDRESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PHONE:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **PARENT(S) NAME(S):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARENT(S) SIGNATURE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_