

St. John the Baptist Athletic Registration Form

Student's Name: _____ Grade: _____

Address: _____ Date of Birth: _____

Parent's First Names: _____

Parent's Cell: Mother _____ Can you receive text messages? Y or N

Father _____ Can you receive text messages? Y or N

Parent's Email: Mother _____

Father _____

Grades 3-8 Registration for (Check appropriate sport(s):

** (\$30.00 per child per Sport)

Girls Sports

Boys Sports

_____ Gr. 7-8 Varsity Basketball

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_____ Gr. 5-6 JV Basketball

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_____ Gr. 3-4 Basketball (Jump Start)

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_____ Gr. 4-8 Cheerleading

Co-Ed Soccer

_____ Gr. 7-8 Varsity Soccer

_____ Gr. 5-6 JV Soccer

Gr. 3-8 Parent Volunteers

_____ Concession Stand/Gate

Parent Name: _____

_____ Score Book/ Clock

Parent Name: _____

_____ Team Parent

Parent Name: _____

Gr. K-2 & Gr. 3 Mini Bolts Registration: (Check the appropriate sport(s): \$20 per sport per child/
\$30 for Developmental Basketball and Mini Bolts Cheerleading).

*****We need to have 12 children to register in order to offer Developmental Basketball*****

_____ Gr. K-2 Developmental

_____ Mini Bolts Cheerleading

***** T-Shirt Size: ___ YS ___ YM ___ YL**

** Coaching positions are available, Please contact Dave Goldstein davejengold@comcast.net

****** All coaches must have all the proper trainings/ certifications.**