



Rancho Peñasquitos Basketball

2001 Season Player Registration
 Each Applicant requires individual application
 (Make Copies as Needed)

For Official Use only
 Date Received _____
 Payment _____
 Rec'd by _____

(Last Name)	(First Name)	(MI)
(Street Address)	(City)	(Zip)
(Phone)	(E-mail address- optional)	(Years Played) (Played in RPB Last Season) Yes NO
(Sex)	(School Grade)	(Date of Birth / MMDDYY) (Height in inches)
(Name of Parent/Guardian)	(Name of Parent/Guardian - optional)	(Volunteer) Coach Sponsor : Please attach Business Card Division Coordinator Board Member As Needed
Shirt Size (YM YL AS AM AL XL XXL)		Shorts Size (YM YL AS AM AL XL XXL)
Is there a day of the week player will be consistently unavailable to participate?		

FEES	
Registration \$95 per player. No Refunds after December 22, 2000	Each player who did not play in RPB last year must attend one of the tryouts. Note: There is a fee of \$25 each time a check is returned unpaid
Fees cover expenses such as court rentals, game officials, insurance and team uniforms of shirt and shorts (HS players do not receive shorts)	
Make checks payable to: Rancho Peñasquitos Basketball or RPB	
Mail check with registration form to: Rancho Peñasquitos Basketball , Post Office Box 720431, San Diego, CA 92172	

MEDICAL RELEASE AND CONSENT TO TREAT A MINOR	
I hereby absolve Rancho Peñasquitos Basketball (RPB), as well as coaches and other individuals associated with RPB, of legal responsibility for injuries incurred by my child, whose name is stated below, during the course of his or her participation in the activities of this program. Additionally, in the event of an injury that may require medical attention, I hereby authorize emergency treatment for my child and I will be responsible for the payment of said treatment.	
_____	_____
Signature of Parent/Guardian	Date
Other person to contact in an Emergency	
(Name)	(Phone)