

St. Joseph/St. Anthony CYO Basketball & Cheerleading Registration Form 2019-2020

A separate and fully completed form for each participant is required and **due by Thursday, October 24th**

Please PRINT all information below so it is legible

Team for which you are registering (*circle one*):

Boy's Basketball:

3rd/4th Grade 5th/6th Grade 7th/8th Grade (Modified) 9th/10th Grade (JV) 11th/12th Grade (Varsity)

Cheerleading:

2nd-5th Grades (Peewee) 6th-9th Grades (Modified)

Participant's Name: _____ Date of Birth: ___/___/___

Parent/Guardian Name: _____ Relationship: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: (____) ____ - ____ Cell Phone #: (____) ____ - ____ Email Address: _____

School Name/District: _____ Grade: _____

Shirt Size: _____ Short Size: _____ Please indicate if a Youth or Adult size (e.g. AL, YS, etc..)

Participant's Parish/Church Affiliation (*if applicable*): _____

Is participant attending religious education classes at St. Joseph/St. Anthony (*circle one*): Yes No

PLEASE NOTE:

All CYO Participants are expected to Volunteer for either the **St. Anthony's Italian Festival** held in June and/or the **St. Joseph's Bazaar** held in September of 2020

GUARDIAN AND PARTICIPANT initial here indicating agreement in Volunteering as stated above: _____

Registration Fee (*must accompany the 2019-2020 Registration Form(s)*)

Boy's Basketball Fee (Grades 3rd thru 6th): **\$55**

Boy's Basketball Fee (Modified, JV & Varsity): **\$65**

Cheerleading Fee (Peewee & Modified): **\$65**

Family Maximum Reg. Fee is: **\$100**

Make check payable to: St. Joseph's CYO

Mail or Drop-Off Registration Form(s) AND Payment to: St. Joseph's Parish Office, 207 Hayes Avenue, Endicott, NY 13760 (Parish Office is only open Monday-Friday, Office Ph. (607) 748-0442)

Please do NOT give the Reg. Form or Fee to the CYO Coach as they have been instructed NOT to accept it

If a participant is planning on trying out for a school basketball or cheer team first, and would like to register just in case he/she does not make the school team, please indicate by writing below the name of the school, team sport, and the date the tryouts are expected to be completed by. By doing so, the participant will at least be registered for their respective St. Joseph/St. Anthony team, and the fee (Check or Cash) that needs to be submitted with the registration form will NOT be deposited pending the outcome of school tryouts.

School Name: _____ Sport: _____ Tryouts expected to be completed by: ___/___/___

Questions concerning CYO program(s) contact:

Basketball: Joe Moody (607) 222-4003 Cheerleading: Diane Lopez (607) 621-0426