

Carmichael



ADULT BASKETBALL REGISTRATION

2011

La Sierra Community Center

5325 ENGLE RD, SUITE 100, CARMICHAEL, CA 95608

Phone: 483-7826 Fax: 483-7861

www.carmichaelpark.com

Season: (Circle One)	Winter	Spring	Summer	Fall
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FIRST NAME: _____ LAST NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ WORK PHONE: _____

TEAM NAME: _____ E-MAIL ADDRESS: _____

You will be emailed the schedule when it's completed so please print clearly when writing your address

Please check the league you wish to enter, indicate first or second choice by numbering choice 1st or 2nd. If there are not enough teams registered in your first choice, you will be placed in the second choice league.

<p>Monday 5-Player:</p> <p>A _____ C _____</p> <p>B _____</p>	<p><u>League Description:</u> Games are played full court with scorekeeper and officials. Teams must provide their own uniforms (shirts) with a number. Winner of league receives championship prize.</p>
<p>Wednesday 3-Player:</p> <p>A _____ C _____</p> <p>B _____</p>	<p><u>League Description:</u> Games are played half court with teams keeping score and calling fouls. No uniform required. League is designed for recreational round robin play.</p>

Please indicate if your team played in our leagues last year (yes), (no), if yes, on which night & league level did you play? _____

Team name that was used: _____

Payment:

League Fees: Monday 5-player - \$400 per team
Wednesday 3-player -\$75 per team

Visa: _____ Mastercard: _____ Check#: _____ Cash: _____

Account Number: _____ Exp. Date: _____

Phone Registration:

Call us at 483-7826 and register over the phone when using a credit card!

*League fees are subject to change throughout the year at the discretion of the district. Please call 483-7826 to check current fees.

Office Use Only

Office Receipt Number: _____