

Rome Select Basketball
2019 AAU Player Registration

Name of Player: _____

Address: _____

Home Phone #: _____ Cell Phone #: _____

Date of Birth: _____ Age: _____ School: _____ Grade: _____

If You Need Uniform Fill out below \$50 uniform fee

Jersey Size: _____ Shorts Size: _____ Number (Pick 2): _____

Volunteers Needed from Team Moms to Assistant & Head Coaches

Check Spot Below if you are interested in helping out

Parent Name: _____

Assistant Coach _____ Head Coach _____ Team Mom _____

This years cost: 3rd - 5TH Grade \$200 / 6TH - 11TH Grade \$300

All players must purchase a 2019 AAU Membership on their website

www.aauboysbasketball.org & www.aaugirlsbasketball.org

Please print out membership card and bring to 1st practice

I submit my son/daughter is physically fit to participate in strenuous athletic activity and I waive Rome Select Basketball of any and all responsibility resulting in Injury or Illness. I hereby authorize the directors / coaches of Rome Select basketball to act for me according to their best judgment in any emergency requiring medical attention. I understand that I am solely responsible for the payment of any such medical expenses and must provide this organization with proof of medical and accident insurance before playing in any tournaments. _____
Initial

Name of Parent/Guardian: _____ (please print)

Signature of Parent or Guardian: _____

Name of Insurance Company: _____

Policy #: _____

There are many activities for children and their families throughout the year with Rome Select Basketball. In many cases, there will be photography at these events. Rome Select Basketball will publish the photos from time to time for use on our website, as well as in addition to various print materials. We ask that parents of minor children to give permission for Rome Select to use their children's photos. _____initial

Player: _____ Parent/Guardian: _____