




# JWBC AAU BASKETBALL

JWBC Basketball Program is all about the development and progress for all youth in today's society. We strive to get the best out of every athlete that enter our program.

 Paterson, NJ

 973-955-5046

 [www.jwbc-basketball.com](http://www.jwbc-basketball.com)



**PLAYER NAME:**

## TO BE FILLED OUT BY PARENT / LEGAL GUARDIAN

Date : .....

Player Name ..... Age: .....

Grade Level: ..... Date Of Birth : .....

Parent Name : .....

Parent Address : .....

Parent Cell Number : .....

## GRADE LEVEL ( CHECK ONE )

<input type="checkbox"/> 2ND GRADE	<input type="checkbox"/> 4TH GRADE	<input type="checkbox"/> 6TH GRADE	<input type="checkbox"/> 8TH GRADE
<input type="checkbox"/> 3RD GRADE	<input type="checkbox"/> 5TH GRADE	<input type="checkbox"/> 7TH GRADE	<input type="checkbox"/> 9TH GRADE

## MEDICAL INFORMATION

I hereby grant permission for the following medical professionals below to administer necessary medical treatment in case of emergency.

Doctor Name : .....	Contact : .....
Doctor Name : .....	Contact : .....

## PARENT/GUARDIAN SIGNATURE:

PRINT PARENT NAME: .....

PARENT SIGNATURE: .....

\_\_\_\_\_  
Parent Signature of Agreement

\_\_\_\_\_  
First Payment Due: 11/13/24

\_\_\_\_\_  
Final Payment Due: 11/25/24