

2020 Boys Winter Rec. Basketball League Team Registration Form Submit this form along with your individual player registration forms and fees.

Org	anization/Team Name: _						
Hea	d Coach:	Phone:	Email:				
Ass	istant #1:	Phone:	Email:				
Assistant #2:			Email:				
Div	vision (Circle one):	8U 10U	12U 14U 17U				
	PLAYER NAME	DOB	PARENTS PHONE	PARENTS EMAIL			
1							
2							
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13							
14 15							
15	XX/:11	eed uniforms? Circle	WEG OF NO				
			ded) Must PAY IN FULL by dea**Teams in need of uniforms mu	adline JANUARY 1 ST 2020. Ist PAY IN FULL by deadline DECEMBER 1ST			
	FULLY complet	Attn Please i	n with individual player registrat i: Stephanie Douglas- Basketball make checks/money orders paya paid in office. Payments can also Detroit PAL 1680 Michigan Ave., Detroi Phone (313) 833-160 sdouglas@detroitpal.o	ble to Detroit PAL. to be made over the phone. t, 48216			
	I have checked the above information for accuracy and understand all league rules and penalties. My team, parents and coac all Detroit PAL Rec. Basketball rules and regulations. Head Coach Name: Signature: Date:						
	Complete return	this form by email no		Commissioner			
			: Stephanie Douglas- Basketball make checks/money orders paya				
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