



St. Paul School CYO Basketball  
Registration Form  
St. Katharine Drexel Parish Athletics

**Parent/Guardian Information:**

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Address: Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Home Phone w/area code

\_\_\_\_\_  
Cell Phone w/area code

\_\_\_\_\_  
Email address

Students registering: (Students **MUST** be attending St. Paul School or Religious Education classes at the Parish of St. Katharine Drexel.)

Name

School

Grade

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Registration Fee:     \$75 (Grades 5-8) 2 Students: \$85 3 or more students: \$95  
                             \$40 (Grade 4)     2 Students \$50 3 or more students: \$60

**All checks should be made to "St. Paul CYO". Payment and paperwork are due Oct 20, 2017.**

**I give my permission for my child/children to participate in St. Paul CYO Basketball and will abide by the School and League policies.**

\_\_\_\_\_  
Parent Name

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

Required forms: \_\_\_\_\_code of conduct \_\_\_\_\_Physical \_\_\_\_\_Birth Certificate