

# TOWN OF ELLENBURG

## 2025 Basketball REGISTRATION FORM



Please fill out this form, save, and return by email to:  
[magoonheather@yahoo.com](mailto:magoonheather@yahoo.com)

Player Information		
Childs Name:		Sex:    M <input type="checkbox"/> F <input type="checkbox"/>
Date of Birth:		Current age:

Contact Information		
Physical Address:		
Parent/Guardian name:		
Phone #:	1.	2.
In case of emergency and I can't be reached: Name and Phone:		

Other Information		
Allergies (include food):		
Physical Limitations:		
Interested in Coaching?	Grade Level	Gender:

AGE GROUP CLASSIFICATIONS	
3rd/4th GRADE	<b><u>MUST</u></b> BE ENROLLED IN 3RD OR 4TH GRADE
5th/6th GRADE	<b><u>MUST</u></b> BE ENROLLED IN 5TH OR 6TH GRADE

**\*\*Please complete page 2\*\***

