



# BLUEFIELD VIRGINIA YOUTH BASKETBALL LEAGUE

## REGISTRATION FORM 2019

- Jr. Pee Wee Division    5 yrs – 8 yrs (8 ½ foot goals)  
 Sr. Pee Wee Division    9 yrs – 11 yrs (10 foot goals)  
 Midget Division        12 yrs – 15 yrs

***Girls and boys may be combined depending upon the number of participants!***

<p>Player Information:</p> <p>Name: _____</p> <p>Address: _____</p> <p>_____</p> <p>Gender: <input type="checkbox"/> M <input type="checkbox"/> F Birth date: _____</p> <p>School: _____</p> <p>Mother's Name: _____</p> <p>Mother's Phone: _____</p> <p>Father's Name: _____</p> <p>Father's Phone: _____</p> <p>Did you play last year? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Age: _____</p> <p>Names &amp; Ages of brothers/sisters in this League:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p><i>Brothers/Sisters will be placed on the same team if they are in the same division.</i></p> <p>-----</p> <p>Jersey Size: <u>Youth</u>    S    M    L    XL</p> <p>                  <u>Adult</u>    S    M    L    XL    2X</p> <p>-----</p>	<p>Registration Information:</p> <p>Fees: \$30.00 per child \$15.00 for second child \$10 for each additional child per family</p> <p><b>Deadline: November 11, 2018*</b></p> <p><b><i>NO LATE SIGN-UPS WILL BE ACCEPTED AFTER DRAFTS (drafts to be scheduled at coaches/board's convenience).</i></b></p> <p>Example of age clarification:</p> <p><b><u>March 1, 2019:</u></b> Player must move to next age division if birth date is prior to this date.  <u>Example:</u> Birth date: Feb. 3, 2006. This player will turn 12 prior to March 1, 2018. The player will play in the 12-15 age division.</p>
	<p><b>Volunteer Help</b></p> <p>We appreciate any support you can offer as we provide quality recreation for our youth. Please mark below the area you wish to volunteer.</p> <p>Coach _____                      Asst. Coach _____</p> <p>Referee _____</p> <p>The Bluefield Virginia Youth Basketball League has made a commitment to provide quality recreation and promote sportsmanship. As a player, I promise to show respect for my coaches, fellow players, and officials. As a parent, I promise to show respect to all coaches, players, other parents, officials, and all League representatives.</p> <p>Player Signature: _____</p> <p>Parent Signature: _____</p>

Please mail all applications and fees, postmarked no later than **November 11, 2018** to:

BVYBL  
P.O. Box 1345  
Bluefield, VA 24605

League Use Only: Fee Received: \_\_\_\_\_ Method:  Cash  Check # \_\_\_\_\_  Other \_\_\_\_\_