

ST. AGNES CYO REGISTRATION 2009-2010

NAME OF ATHLETE: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

DATE OF BIRTH: _____

SCHOOL FOR 2009-10: _____

GRADE FOR 2009-10: _____

HAS ATHLETE PLAYED CYO BEFORE? YES _____ NO _____

IF YES, WHAT COACH: _____

PARENT'S NAMES: _____

E-MAIL(S): _____

SHORTS SIZE: YS YM YL AS AM AL AXL

SHIRT SIZE: YS YM YL AS AM AL AXL

THE REGISTRATION FEE IS \$150.00 AND INCLUDES A FULL UNIFORM.

THE REGISTRATION FEE FOR 4TH GRADE IS \$120.00.

THE FEE ALSO ENTITLES THE PLAYER TO THE COMMUNION BREAKFAST.

PLEASE MAKE CHECKS PAYABLE TO "ST. AGNES CYO".

PAYMENT

CASH: _____

CHECK/CHECK NO.: _____

AMOUNT: _____

NOTE: IF THIS IS A PAYMENT FOR MORE THAN ONE PLAYER, IDENTIFY NAME AND GRADE OF THE OTHER PLAYER.

NAME: _____

GRADE: _____