

**PLAYER'S INFORMATON FORM**

Player's Name \_\_\_\_\_ Birth date \_\_\_\_\_

Address \_\_\_\_\_ Gender \_\_\_\_\_

City \_\_\_\_\_ Age \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

In case of emergency, and a parent can't be reach, please supply a emergency contract.

**Emergency Contact**

Name \_\_\_\_\_

Phone \_\_\_\_\_

Please list any medical problems that you would like your Child's coach to know.

**Medical Diagnosis**

**Medication**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Thank you and let's have a great season.

Signature \_\_\_\_\_