



2011

BASKETBALL CAMP REGISTRATION

Date: July 11th thru 14th
Time: 9:00 AM - 4:00 PM
Place: Center Moriches High School
Grades: 2nd thru 8th
Fee: \$140.00

BRING LUNCH AND A WATER BOTTLE!

Registrations must be mailed in by June 18th

Send check payable to MYO and registration form to:
MYO • 253 Frowein Road • Center Moriches, NY 11934

For more information go to www.morichesyouth.org or call 878-1696

Registration Form

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone (Home): _____ (Other): _____

Date of Birth: _____ Age: _____ Grade: _____ School: _____

Email Address: _____

Shirt Size: **ADULT** **S M L** **YOUTH** **S M L**

Pant Size: **ADULT** **S M L** **YOUTH** **S M L**

I give my permission for my son/daughter to participate in the MYO Basketball program.

Parent/Guardian Signature: _____ Date: _____

Amount Paid Cash: _____ Check: _____