

**St. Joseph, Pinole  
CYO  
Player Registration Form**

Please Indicate:       NEW PLAYER       RETURNING PLAYER

Player Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Are you a student at St. Joseph School?  YES  NO If yes, GRADE: \_\_\_\_\_

Are you enrolled in a Faith Formation Class at St. Joseph?  YES  NO

I am registering for:

**FALL SPORTS**

BOYS' BASKETBALL (GRADES 3-8)       GIRLS' VOLLEYBALL (GRADES 3-8)       X-COUNTRY (GRADES K-8)

**SPRING SPORTS**

TRACK & FIELD (GRADES K-8)       GIRLS' BASKETBALL (GRADES 3-8)

\*\*\*\*\*

**PARENT INFORMATION**

Father's Name: \_\_\_\_\_ Father's Cell # \_\_\_\_\_

Father's Address: \_\_\_\_\_  
(if different from above)

Father's E-Mail Address: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Mother's Cell # \_\_\_\_\_

Mother's Address: \_\_\_\_\_  
(if different from above)

Mother's E-Mail Address: \_\_\_\_\_

Signature of Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_