

# COLLEGE BOUND BASKETBALL CLUB

AN ATHLETIC TEAM OF THE CHRISTIAN SPORT CAMPS, INC. 3915 REYNOLDSBURG-NEW ALBANY ROAD  
NEW ALBANY, OHIO 43054

(614) 638-6311 VMS (614) 775-9997 FAX [RANDY@GOCOLLEGEBOUND.ORG](mailto:RANDY@GOCOLLEGEBOUND.ORG) E-MAIL  
[GOCOLLEGEBOUND.COM](http://GOCOLLEGEBOUND.COM) **TAKE YOUR GAME TO COLLEGE!**

## PLAYER-MEMBERSHIP APPLICATION-2009

MEMBER'S FULL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE(S) \_\_\_\_\_ E-MAIL \_\_\_\_\_

PARENT/GUARDIAN'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_ E-MAIL \_\_\_\_\_

PHONE(S) \_\_\_\_\_

MEMBER'S DATE OF BIRTH \_\_\_\_\_ CURRENT GRADE \_\_\_\_\_

SCHOOL NAME \_\_\_\_\_

POSITIONS PLAYED \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_

EMERGENCY CONTACT PERSON \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

EMERGENCY PHONE NUMBER \_\_\_\_\_ RELEASE FILED? \_\_\_\_\_

SHORT SIZES \_\_\_\_\_ JERSEY SIZE \_\_\_\_\_ JERSEY NUMBER(CHOICES) \_\_\_\_\_

**By signing below, I apply for membership in the COLLEGE BOUND BASKETBALL CLUB. I agree to pay a non refundable \$450.00 fee to play. I understand that I am to return the basketball uniform in an undamaged clean condition upon completion of the season. If I am unable, I agree to pay \$50.00 to College Bound for the loss of or damage to any part of the uniform. I recognize that there are many adults, volunteers and coaches that have devoted a great deal of time, money and effort to allow me to play at this level. I agree to be prompt, courteous, and committed to practices, games and scrimmages on behalf of the club. I agree to display a good and positive attitude, be a good sport at all time, not use foul language, be respectful of my opponents, fans, referees, teammates, coaches and volunteers involved in this activity. I agree to do my best in my schoolwork. I recognize that my actions and involvement represent the College Bound Basketball Club, my parents and family, my coaches and volunteers. Finally, I agree that the coaches and directors of the College Bound Basketball Club may revoke my membership without refund, for violations of this agreement or for a consistent display of a lack of respect to my coach, teammates, opponents and others associated with this club.**

X=====X  
**PARENT/GUARDIAN SIGNATURE | PARENT/GUARDIAN PRINTED NAME |RELATION | DATE**

X=====X  
**PARENT/GUARDIAN SIGNATURE | PARENT/GUARDIAN PRINTED NAME |RELATION | DATE**

X=====X  
**MEMBER-ATHLETE SIGNATURE | MEMBER-ATHLETE PRINTED NAME | DATE**