

Bethany United Methodist Church

Leisure Ministries
Boy's Basketball League
2009-2010 Team Roster

Church Name _____ Junior Team _____ Senior Team _____

Church Address _____ Minister's name _____

City / State / Zip _____ Church phone _____

I plan to participate in the Summerville Boys' Church Basketball League. I accept the responsibility for all injuries that I may receive while participating in this league. I understand that Bethany United Methodist Church and Summerville Baptist Church does not have insurance coverage for me and that I am personally responsible for my injuries.

	Print Player's Name	Age	Date of Birth
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____
13.	_____	_____	_____
14.	_____	_____	_____
15.	_____	_____	_____

I verify (by signing below) that I have read the guidelines for the Boy's Basketball League and that the players listed are authorized to represent this church.

Rev. 9/23/2008

Print team coach's name	Team coach's signature	Date	Phone #
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Print assistant coach's name	Assistant coach's signature	Date	Phone #
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Team fee due on December 1st. Team roster due at first game.