

Frederick Warriors

Christian Homeschooling Basketball Team

2024 Season

Player Name: _____

Address: _____

Telephone: _____

Email: _____

Grade: _____ Birth Date: _____

Parents' Names: _____

Emergency Contact: _____

Prior Experience: _____

Height: _____ Age: _____

Physical Limitations: _____

Parents Willing to Volunteer in the Following Areas: _____

Comments: _____
