

USCAK YOUTH GAMES Registration Form

(Must be turned in before the games)

DATE:

INDIVIDUAL SPORT

Name of sport(s) _____

Name of club/team/organization

Note: \$3.00 fee required for each participant.

Participant:

Last

First

Age

DOB

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of adult in charge: _____

Telephone #: _____

Mailing Address: _____
