

PEFYA Prince Edward Farmville Youth Association

Application for Youth Basketball

Questions? Contact the Farmville Recreation Director at 434-392-8465 or E-mail: cbolt@farmvilleva.com

Mail this form, payment, and copy of Birth Certificate to:

PEFYA P.O. Box 91 Farmville, VA 23901

Please Print

Player's Full Name (as it appears on Birth Certificate): _____

Nickname: _____ Male _____ Female _____

Current Age: _____ Years _____ Months Birthday (MM/DD/YY): _____

Parents or Guardians name: _____

Relationship to Player: _____ Home Phone: _____ Work Phone: _____

Address: _____

City: _____ Zip Code: _____ E-mail: _____

Physician: _____ Physician Phone: _____

T-Shirt Selection: (circle one)

Youth Medium

Adult Small

Adult Large

Youth Large

Adult Medium

Adult X-Large

Check Age Group That Applies: (ELIGIBILITY BASED ON AGE AS OF DECEMBER 31st)

_____ 6 years old to 7 years old

_____ 8 years old to 10 years old

_____ 11 years old to 12 years old

_____ 13 years old to 15 years old

Fees: \$55.00 per each child (includes team jersey)

\$10.00 late fee per child (check www.eteamz.com/pefyasports or local paper for due dates)

Parent/Guardian Participation:(PEFYA is an all-volunteer organization; please help us keep it running)

I/We are willing to participate and assist with the following PEFYA activities:

_____ Coach

_____ Act as a Team Parent

_____ Fundraise

Consent/Waiver Agreement:

I/We consent to my child participating in the Farmville Recreation Department/PEFYA and if I am not present hereby give my permission for the coach or representative of the organization to obtain any required medical attention my child may need. I/We will notify the coach of any physical limitations (allergies, hearing, sight, etc.) or other additional information they need to know about my/our child. I/We understand that PEFYA/Recreation Department conducts fundraising activities in addition to the registration fee and that each player is strongly encouraged and expected to participate. I/We understand that each parent may be asked (by their team parent) to work the concession stand during the season.

Parent/Guardian Signature: _____ Date: _____

OFFICE USE ONLY: Cash ___ Check # _____ Amount PD: _____ Date: _____ Int: _____