

KIDZ KONNECT BASKETBALL REGISTRATION (for ages 10-18)

Begins Saturday, January 27, 2018, 1-2 pm at CFNI Gym.

PERMISSION: (Must be signed to participate)

I, (your name) _____ give permission for my child (ren)

_____, age _____;

_____, age _____;

_____, age _____;

_____, age _____

to join Kidz Konnect Basketball class on Saturdays from 1-2 pm at Christ For the Nations Gym. I understand that my child must attend the Preteen/Teen Konnect service from 11 am-1 pm in JMH in order to play basketball.

- I will pick my child(ren) up after Basketball practice: _____
- I cannot pick up my child(ren) but he (or they) may walk home after practice. _____

I have filled out the Liability Release form and turned it in so that my child(ren) can participate. _____

The Liability/Release form must be filled out and turned in before your child(ren) can stay and play basketball.

SIGNED: _____ (Parent/Guardian only)

PRINT

NAME: _____ DATE: _____

ADDRESS: _____

EMAIL: _____

PHONE: _____ FACEBOOK: _____