

FORMS & FEES EXPLANATION PAGE

MEDICAL PERMISSION FORM:

DUE: First team practice session.

This form must be completed, signed by the parent, and turned into the coaching staff at the first practice session. Please understand that your athlete will not be allowed to participate in any team practice session until submitted.

BASKETBALL REGISTRATION FORM:

DUE: By 11-01-09

This form must be mailed along with registration fee (see fee schedule below) and uniform deposit to be received by November 1, 2009.

Please mail to: Pam Shaffer
15301 River Road
Chesterfield, VA 23838

PLAYER-PARENT CODE OF CONDUCT:

Please read this form. You agree to abide by the Player-Parent Code of Conduct upon the signing of your athlete's Registration Form.

UNIFORM CARE NOTICE:

Please read and follow the care instructions provided. The uniform(s) will be returned to CVHAA at the close of the basketball season.

FEES SCHEDULE:

Uniform Deposit of \$50 (refunded per Uniform Care Notice) due with Registration Form.

JV/Varsity Teams: Total Registration Fee of \$300.00 per athlete.
~ \$150 due with Registration Form by 11-01-09.
~ Any remaining balance due by 12-01-09.

Middle School Teams: Total Registration Fee of \$125.00 per athlete.
~ \$75 due with Registration Form by 11-01-09.
~ Any remaining balance due by 12-01-09

Note: Please mail any remaining balances, due by 12-01-09, to Pam Shaffer at the above address