



ADVANCED SKILLS PROGRAM

REGISTRATION FORM

NAME: _____ DATE: _____
(LAST) (FIRST) (MIDDLE)

ADDRESS: _____ TEL. NO. _____

DATE OF BIRTH: _____ AGE: _____ HEIGHT: _____ WEIGHT: _____

NAME OF SCHOOL: _____ GRADE: _____

ADDRESS _____ CITY _____

NUMBER OF OTHER SPORTS PROGRAM ATTENDED _____ WHAT PROGRAM? _____

RULES & REGULATIONS

A. RESPONSIBILITY FOR FITNESS

A player should be physically and mentally fit at all times. He shall be willing to undergo the advanced skills program as required by the coach and the coaching staff.

B. TRAINING SESSIONS

- 1.Punctuality/ perfect attendance is required throughout conditioning & training sessions.
- 2.Disciplinary actions shall be imposed upon those who commit unexcused absences or consecutive tardiness during the training.
- 3.Players must be in their proper attire and must be ready to start the training on time.

SPORTSMAN AT ALL TIMES

A SUNSPORT TRAINEE shall always behave in a manner befitting a TRUE SPORTSMAN. He must refrain from unsportsman like acts on and off the hardcourt. He shall at all times bear in mind that the good image of SUNSPORT BASKETBALL TRAINING CAMP is a principal consideration and objective in his engagement as a member.

C. EXCUSES FROM PRACTICE

- 1.Excuses must be secured from the head coach at least one (1) day/s before the practice.
- 2.If the trainee is ill, advice through telephone may suffice.
- 3.Only those with valid reasons are excused from the practice.

This is a supplement to the Trainee's Rules of Conduct that they will execute in the SUNSPORT BASKETBALL TRAINING CAMP.

ACCEPTANCE AGREEMENT

This is to formalize our acceptance of your child to participate in our training and exercise. Our acceptance is based on the physical and mental capacity of your child to undergo the said training program.

We are not in any way responsible or liable for any untoward accidents that may happen to your child in the course of his/her attendance and also in any untoward incidents that may occur after their scheduled training time.

If you agree with the above conditions, please sign on the space provided for.

READ, UNDERSTOOD & ACCEPTED

Respectfully yours,
SUNSPORT BASKETBALL TRAINING CAMP & ADVANCED SKILLS PROGRAM
By :

Signature Over Printed Name
Parents / Guardian / Enrollee


GIOVANNI ROMARATE
Training Director


JEFFERSON L. CODERA JR.
U.S.A. CERTIFIED COACH & SKILLS TRAINER

CLAIM STUB

Receipt No. _____

NAME : _____

ITEMS : BALL ☐ UNIFORM ☐

RECEIVED BY: