

Please put an "x" in the appropriate box(es).	<b><u>SELECT THE APPLICABLE DIVISION FOR YOUR TEAM</u></b>	
	<b>x</b>	<b><u>BASKETBALL TEAM</u></b>
		<b><u>CHEERLEADING TEAM</u></b>
		<b><u>MULTI PARISH?</u></b> Requires deanery director approval! (refer to Rule Book)
	<b>If Multiparish</b>	<b>Additional Parish Name:</b>
		3rd & 4th grade co-ed
		5th & 6th grade (nite) parish boys
		5th & 6th grade (nite) parish girls
		5th & 6th grade parish school boys
		5th & 6th grade parish school girls
		7th & 8th grade (cadet) parish boys
		7th & 8th grade (cadet) parish girls
		Catholic grammar school boys
	Catholic grammar school girls	
	Intermediate (senior) parish boys	

<b><u>2018 / 2019 CYO Season</u></b>	
<b><u>SPONSORING PARISH / SCHOOL INFORMATION</u></b>	
<b>Parish / School Name</b>	
If your Parish is sponsoring 2 or more teams in the same division, indicate color, number, or letter of this team.	
<b>Parish / School Contact</b> (AD, parish youth administrator, etc.)	
<b>Parish / School Contact - Email address</b>	
<b>Parish / School Phone</b>	

<b><u>COACHS' INFORMATION</u></b>						<b><u>CYO USE ONLY</u></b>		
<b><u>Title</u></b>	<b><u>Name</u></b>	<b><u>Email</u></b>	<b><u>Phone #</u></b>	<b><u>Cell Phone #</u></b>	<b><u>Address</u></b>	Rules Acknowl- edgment	ASEP Cert	
<b>Head</b>								
Birthdate								
<b>Asst.</b>								
Birthdate								
<b>Asst.</b>								
Birthdate								
<b>*Asst.</b>								
Birthdate								
<b>*Asst.</b>								
Birthdate								

Note - If you have a CIT (Coach In Training) listed above, WRITE "CIT" next to his/her name and circle it.

**PARTICIPANTS / PARENT INFORMATION**

											CYO use only		
	<u>Participant's Name</u>	<u>Phone #</u>	<u>DOB</u>	<u>Address</u>	<u>Grade</u>	<u>Parish (Initials)</u>	<u>Attend Catholic school? Yes or No.</u>	<u>If yes, name of Catholic school</u>	<u>Parent's Name(s)</u>	<u>Non-Catholic? Yes or No</u>	<u>perm form?</u>	<u>birth cert?</u>	<u>Non-cath address?</u>
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**IMPORTANT!** With my initials & signature below, I certify that all of the above listed participants are members of the specified school or parish and meet ALL eligibility requirements, as stated in the Diocesan CYO Rulebook, to participate in CYO athletics . Also, with my initials and signature below, I certify that all rostered coaches have completed the necessary training and documentation in compliance with Diocesan policy and procedures for the Protection of Children and Young People, and the Code of Ministerial Conduct.

Head Coach's Initials: \_\_\_\_\_

**Sponsoring Pastor or Moderator is required to sign below AND on the line below the last listed participant above.**

Pastor / Designee Signature: \_\_\_\_\_  
 If Multiparish - Pastor / Designee Signature (Additional Parish): \_\_\_\_\_

Signature of Head Coach \_\_\_\_\_ **Date** \_\_\_\_\_  
 Signature of CYO State Board Member at Roster Review \_\_\_\_\_ **Date** \_\_\_\_\_  
 Signature of Deanery Director if MULTI PARISH team approval is granted \_\_\_\_\_ **Date** \_\_\_\_\_