

# WPAR 2017 / 2018 BASKETBALL REGISTRATON

225-665-3755

[WWW.WalkerParksAndRecreation.com](http://WWW.WalkerParksAndRecreation.com)



**All Players Must Have Copy of Birth Certificate On File**

Fee is \$80.00 per player

ALL PLAYERS MUST ATTEND A SCHOOL IN LIVINGSTON PARISH

Fee Includes One Uniform Basketball Jersey.

Make Checks and Money Orders Payable to: W.P.A.R.

Registration Form and payment accepted at DPW building located on Ballpark Rd OR at Walker City Hall

You may also mail your registration and payment to: P.O. Box 217, Walker, LA 70785 Attn: Parks Dept.

Office Use Only	
Birth Certificate:	_____
Paid Via:	Check _____
	MO _____
	Cash _____
Receipt No.:	_____
Uniform Size:	_____

**Please Print Clearly**

Player Last Name: \_\_\_\_\_ Player First Name: \_\_\_\_\_

Circle One: Male / Female Date of Birth: \_\_\_\_\_

**\*\*\*\*PLAYER'S AGE ON SEPTEMBER 1ST, 2017 \*\*\*\***

Player's Jersey Size: Youth: S, M, L OR Adult: S, M, L, XL, XXL

Parent/Guardian First and Last Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_  
Street City Zip Code

School Attending : \_\_\_\_\_

Preferred Contact Number: \_\_\_\_\_ Okay to Receive Text Msg? Yes / No  
Circle

E-Mail Address: \_\_\_\_\_ Interested in Coaching? YES / NO  
Circle

Please list the NAME and AGE of siblings in same age division:  
\_\_\_\_\_

Please Put any extra info or comments here:  
\_\_\_\_\_  
\_\_\_\_\_

**IMPORTANT INFO:**

*\*By signing this form, you acknowledge that you have received, read, and agree to abide by the WPAR Code of Conduct.*

*\*All documentation and payment must be received before your child will drafted to a team.*

*\*WPAR CANNOT guarantee Carpool or Coach requests.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_