

LCA YOUTH BOYS  
BASKETBALL LEAGUE  
PLAYER INFORMATION  
2011-2012

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Player Cell Phone \_\_\_\_\_

Grade \_\_\_\_\_

Parent's Names \_\_\_\_\_

Address (if different) \_\_\_\_\_

Mom - Cell \_\_\_\_\_ Mom - Work \_\_\_\_\_

Dad - Cell \_\_\_\_\_ Dad - Work \_\_\_\_\_

Email addresses:

Player \_\_\_\_\_

Mom \_\_\_\_\_

Dad \_\_\_\_\_

Please indicate your jersey size. (please specify youth or adult)

\_\_\_\_\_

\*email the form to [bcarter@lexingtonchristian.org](mailto:bcarter@lexingtonchristian.org) or fax to 223-3769  
(attn: Brad Carter)