

**ARCHDIOCESE OF BALTIMORE
ARCHDIOCESAN BASKETBALL**

TEAM AND LEAGUE FEES APPLICATION

PARISH _____
PARISH COORDINATOR _____
ADDRESS _____
HOME PHONE _____ WORK PHONE _____

***** PLEASE LIST A COACHES NAME, ADDRESS, PHONE # AND LEAGUE # *****
***** FOR EACH LEAGUE YOU ENTER ON THE BACK OF THIS FORM *****

<u>AGE GROUP</u>	<u>LEAGUE #</u>	<u>LEAGUE #</u>	<u>LEAGUE #</u>	<u>LEAGUE #</u>
8 - 10 BOYS	_____	_____	_____	_____
10 - 12 BOYS	_____	_____	_____	_____
12 - 14 BOYS	_____	_____	_____	_____
14 - 16 BOYS	_____	_____	_____	_____
16 - 18 BOYS	_____	_____	_____	_____
8 - 10 GIRLS	_____	_____	_____	_____
10 - 12 GIRLS	_____	_____	_____	_____
12 - 14 GIRLS	_____	_____	_____	_____
14 - 18 GIRLS	_____	_____	_____	_____

ALL TEAM APPLICATIONS AND LEAGUE FEES MUST BE PAID BY NOVEMBER 2, 2005
RETURN FORM AND MONEY (\$80.00) FOR EACH TEAM PER LEAGUE) TO

MARY ALICE JACKSON
50 WADE AVENUE
BALTIMORE, MD 21228

MAKE CHECKS PAYABLE TO "ARCHDIOCESAN BASKETBALL"