



2011-12 WALL RECREATION BASKETBALL COACH / ASST COACH / SPONSOR REGISTRATION FORM

SEE REVERSE FOR PLAYER REGISTRATION FORM

COACH / ASSISTANT COACH

Please indicate below 2 choices for your practice day, time & school. Practices are held once a week, Mon—Fri between 4 & 8 p.m. at one of the 4 elementary schools. We will try our best to give you one of your choices but they cannot be guaranteed. All coaches will be required to be fingerprinted by the Township of Wall. Details will be forwarded to you at a later date. It is imperative that you provide your e-mail address for this reason and to receive other important information. The game schedule will be posted on our website (www.wallnj.com) sometime in late November. Coaches, are selected on a 1st-come, 1st served basis. There will be a limit of 1 coach & 1 assistant coach per team. You may not coach more than 2 teams.

Name _____ Coach _____ or Assistant Coach _____

Address _____ Zip _____ Phone _____

E-mail Address _____
(must provide)

Player's Name _____ Grade _____ Male _____ Female _____

If you have signed up to be an assistant coach and we are in need of head coaches, would you be willing to take the head coach position? Yes ___ No ___

PLEASE INDICATE BELOW WITH A # 1 & 2 FOR YOUR 1ST & 2ND CHOICES .

Please note that W. Belmar is not available on Tuesdays & Wednesdays from 4-5 p.m. & Thursdays from 7-9 p.m.

ALLENWOOD ___ OLD MILL ___ CENTRAL ___ W. BELMAR ___

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
4—5 PM					
5—6 PM					
6—7 PM					
7—8 PM					
8—9 PM					

NOTE: This year, practice days may change weekly. Schedule will be posted if necessary. If you cannot make a practice, a parent may fill in.

SPONSOR—\$100 per team

Sponsor/team name (as will be printed on shirt) _____

Contact Name & Phone # _____ / _____

Relation to Player _____ Player's Name _____ Grade _____

Division: Boys 3-4 ___ Girls 3-4 ___ Boys 5-6 ___ Girls 5-6 ___ Boys 7-8-9 ___ Girls 7-8-9 ___ Any ___

Date Paid _____ Check # _____ Cash _____ Amount _____