



St.Kitts Amateur Basketball Association

Junior Division Registration

- Club name: _____
- Team Name _____
- Mailing Address _____

- Phone _____ • Fax _____ • E-Mail _____
- Manager _____
- Coach _____
- Home Court (Practice Venue) _____
- Team Captain(s) _____
- Club/Team Management _____

- Sponsor _____
 - Address: _____

- Players:

(Please list the full names of players, their playing positions and date of birth clearly on the sheet and in the spaces provided. All information must be completed before submission of registration .)