Charis Basketball Signup Sheet
2025–2026

Hello, and welcome to Charis Academy **Boys and Girls'** Winter Basketball season! Our goal is to work hard, develop skills, and draw players closer to our Savior, Jesus Christ. Your player will practice and be encouraged to learn and grow both spiritually and physically. We believe competing in sports is a great avenue to learn about yourself, how to be a member of a team, and how overcoming challenges, winning, and losing can be a great way to incorporate faith into the lives of young men and women. Thank you for signing up, and know that we are thankful for your commitment to your player and the Charis Academy Sports Program. We look forward to working with you!

We will practice at Arthur Street School on Tuesdays, 4–6 pm, and at the Eagle Rock Gym on Mondays and Fridays, 3–5 pm. For Eagle Rock, **any individual (parent/guardian/friend/etc.) picking up or dropping off your player must provide a copy of their driver's license**. You will not be able to enter the security gate without prior authorization. We are guests and will work hard to earn the trust of the Eagle Rock staff and management, with hopes of expanding our relationship with them. (If you do not have a photocopier, please stop in the front office and ask to have your ID copied for the file.)

Please include:
☐ **Check or Cash for $100.00 per player to Charis Academy by Friday, October 31st, 2025.**
☐ **Copy of the driver's license(s) of all pickup and drop-off contacts**

Please complete and return the form below. You may keep the above information for your records.

2025–2026 Charis Basketball Signup

Player Name: _____ **Age:** _____ **Grade:** _____

Jersey Size: _____ (Youth / Adult) (Small–3XL) **Number Choice:** 1st:____ 2nd:____

Has the player played basketball before? ◯ Yes ◯ No

Any medical conditions or allergies we should know about? Explain below.

Parent/Guardian Name(s) who will be driving players to practice:

Name: _____ **Primary Phone Number:** _____

Name: _____ **Primary Phone Number:** _____

Name: _____ **Primary Phone Number:** _____