



**Columbia Youth Basketball Association (CYBA)
2010 Grades 10 – 12 BOYS Team Registration Form
Registration Deadline: November 30, 2009**

Team Formation Guidelines

Eligibility

1. CYBA 10 - 12 Boys League is open only to Columbia Public Schools and other private schools within the City of Columbia.
2. The league is open only to players who are not playing on their school team for the same school year.
3. If you were on the school team, but suspended for any reason, you are **NOT** eligible for **ANY** CYBA 10–12 team play.

Team Formation

1. Players may form their own teams and register as a team, however, each team **MUST** be prepared to assume a player who registers on their own.
2. A team roster must consist of a minimum of eight (8) players – no exceptions.
3. For those wanting to play with no team affiliation, CYBA will place you on a team.
4. **In addition to a team registration form, each player, must submit his own individual player registration form. This form is available at www.cyball.com, your school or Columbia Parks and Recreation.**

Adult Supervision

1. Each team must have adult representative/coach age 21 or older. The Adult representative/coach must be present at each game. **If the adult representative/coach isn't present by game time, the game will be forfeited.**
2. This person must also fill out a team registration form before a team will be allowed in the league. The team registration form is available at www.cyball.com or Columbia Parks and Recreation.

Player Team Roster Information (Please Print) Minimum of 8 players needed.

1. Player Name _____ Home Phone _____ T-shirt size _____
2. Player Name _____ Home Phone _____ T-shirt size _____
3. Player Name _____ Home Phone _____ T-shirt size _____
4. Player Name _____ Home Phone _____ T-shirt size _____
5. Player Name _____ Home Phone _____ T-shirt size _____
6. Player Name _____ Home Phone _____ T-shirt size _____
7. Player Name _____ Home Phone _____ T-shirt size _____
8. Player Name _____ Home Phone _____ T-shirt size _____
9. Player Name _____ Home Phone _____ T-shirt size _____
10. Player Name _____ Home Phone _____ T-shirt size _____

***Please rate your team on a scale of 1 – 10 on skill level (1= recreational and 10 = very competitive)**

Circle one: 1 2 3 4 5 6 7 8 9 10

Coaches and Assistant Coaches are subject to background checks. Signature and social security number required.

PLEASE PRINT:

Head Coach Name: _____ Social Security No. _____
Address _____ City/State/Zip _____
Best Daytime Phone Number: _____ Email (REQUIRED) _____

Signature _____

Assistant Coach Name: _____ Social Security No. _____
Address _____ City/State/Zip _____
Best Daytime Phone Number: _____ Email (REQUIRED) _____

Signature _____

FEES:

- \$600.00 per team - CYBA will assign your team color and sponsor.
- \$775.00 per team - We would like to sponsor our own team.
By sponsoring our own team, we get to choose our own team color and name.

Please RANK your color choices from 1 (first choice) to 12 (last choice).
(CYBA will provide a sleeveless shooter shirt for each player. Colors awarded on a first-come, first-serve basis.)

_____ Red	_____ Light Blue	_____ Royal	_____ Maroon	_____ Light Pink
_____ Purple	_____ Dark Green	_____ Gold	_____ Gray	_____ Black
_____ Kelly Green	_____ Orange	_____ Navy	_____ Ash	_____ White
_____ Teal				

Please list your ideas for a team name. Team name will be screened in block letters.
Logos/graphics will not be screened (PLEASE PRINT - Subject to board approval.)

1. _____
2. _____
3. _____

Please mail team and individual player registrations with payment to:
CYBA
P.O. Box 30725
Columbia, MO 65205

Registration Deadline: November 30, 2009

For questions, call (573) 875-8124 or e-mail cybahoops@yahoo.com.

**IF PAYMENT IS NOT RECEIVED WITH YOUR TEAM'S ROSTER & INDIVIDUAL REGISTRATION FORMS,
YOUR TEAM WILL NOT BE REGISTERED OR SCHEDULED TO PLAY.
THERE WILL BE NO EXCEPTIONS TO THIS POLICY.**

For office use only: Check No. _____ Date Rec'ed _____ Notes _____