

CLUB1 BASKETBALL



Club1 League Check Payment Form

Team Name _____ Grade _____ Gender M or F

League Location NI NW NE NC FW League Session Pre Regular Post

Coaches Name _____ Coaches Email _____

Coaches Cell _____

High School Program _____ High School Coaches Name _____

High School Coaches Email _____

Amount Paid _____

Check # _____

Please make check payable to Club1 and mail with this form to:

Club1 Basketball
3946 Ice Way
Fort Wayne, IN 46805