



2009-10 CYO SPORTS PILOT ON-LINE REGISTRATION - WINTER TEAM CONFIRMATION



When registering on-line complete this form. YOU MUST ENCLOSE PAYMENT and return to the CYO Office at 7911 Detroit Avenue, Cleveland, OH 44102, Attention: Bookkeeper by Friday, November 6, 2009 for Grade School Winter Sports and by Wednesday, November 18, 2009 for High School Basketball.

PARISH/SCHOOL _____

CITY _____

**BASKETBALL BOYS GRADE SCHOOL
VARSITY**

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

JUNIOR VARSITY

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

CADET

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

DEVELOPMENTAL

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

ELEMENTAL

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

**BASKETBALL BOYS HIGH SCHOOL
VARSITY**

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

JUNIOR VARSITY

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

**CHEER
VARSITY**

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

CADET

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

**BASKETBALL GIRLS GRADE SCHOOL
VARSITY**

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

JUNIOR VARSITY

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

CADET

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

DEVELOPMENTAL

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

ELEMENTAL

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

**BASKETBALL GIRLS HIGH SCHOOL
VARSITY**

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

JUNIOR VARSITY

NUMBER OF TEAMS: _____
HEAD COACH: _____
HEAD COACH: _____
HEAD COACH: _____

WRESTLING

1-14 Athletes _____
15-24 Athletes _____
25+ Athletes _____
HEAD COACH: _____

COMPLETED BY _____

PRINT NAME: _____

PHONE NUMBER: _____