



OLM/ND CYO BASKETBALL PROGRAM
2010-2011 Season
Open to all Boys and Girls in Grades 5-8
\$100 Registration Fee Made Payable to OLM Basketball

Player's Name: _____

Date of Birth: _____ Grade in Sept: _____ School: _____

Catholic / Non-Catholic (circle one) Registered Parishioner of either Parish: Yes / No (circle one)

Notre Dame / OLM (circle one) Player attends CCD Class at either Parish: Yes / No (circle one)

Address: _____

City: _____ New Jersey Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____ / _____ (Parent's email)

Mother's Name: _____ Father's Name: _____

Uniform Size: _____ Medical Conditions: _____

Emergency Contact Name: _____

Phone: _____ Relationship: _____

Registration forms should be mailed with a **\$100** check payable to **OLM CYO Basketball**:

Mike Holleran
11 Manchester Drive
Whippany, NJ 07981

If your child is playing C.Y.O. for the first time, also submit a copy of their BIRTH certificate AND their BAPTISMAL certificate. These documents are required for the C.Y.O. Program in order to play.

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Mark Tremper
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