

Please Remit Payment
with Application.



EMMANUEL UMC

Sports Application

2404 Kirby Road
Memphis, TN 38119
901-754-6591

Paid: _____
(office use only)

Name: _____ M / F D.O.B.: _____ Grade: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

School: _____ Church affiliation: _____ Age: _____

Mother/Guardian: _____ E-mail: _____

Home #: _____ Work#: _____ Cell #: _____

Would you like to coach? _____ Assist coach? _____

Father/Guardian: _____ E-mail: _____

Home #: _____ Work#: _____ Cell #: _____

Would you like to coach? _____ Assist coach? _____

Emergency Contact: _____ Home #: _____ Cell #: _____

AGE:		Sport:	
Coed J-K _____	5th & 6th _____	Fall Soccer _____	Baseball _____
Coed K _____	7th & 8th _____	Flag Football _____	Softball _____
1st & 2nd _____	9th & 10th _____	Basketball _____	T-Ball _____
3rd & 4th _____	11th & 12th _____	Spring Soccer _____	

UNIFORM SIZE:

SHIRT: YS _____ YM _____ YL _____ AXL _____ AXXL _____
 AS _____ AM _____ AL _____

SHORT: YS _____ YM _____ YL _____ AXL _____ AXXL _____
 AS _____ AM _____ AL _____

PARENT/GUARDIAN SIGNATUR _____