

Cambridge Recreation Cambridge Pride Basketball

Payment Rec'd		
	Cash	
	Check #	

Youth Information

Last Name	First Name	Date of Birth	Age
Home Address	City, State, Zip Code	Home Telephone Number	
If your child is selected to join			550. Please
	ney order payable to "C s must be paid by the fi		ı .
	Parent/Guardian Inform	ation_	
Mother/Guardian Name		Father/Guardian N	ame
Home Address		Home Address	
Home Telephone Number		Home Telephone N	lumber
Cell Phone Number		Cell Phone Number	
E-Mail Address First Aid and Emergency Medical Ca	ro Consont	E-Mail Address	
Health Insurance Company:	<u>re consent</u>	Policy #:	
authorize Cambridge Recreation sta child First Aid/CPR when appropriate		basics of First Aid and	or CPR to give
understand that every effort will be medical attention for my child. How		_	,
ransport my child to the nearest me	· ·		trootmont for
 child.	, and to secu	re necessary medical	treatment for i
Does your child have any medical co	onditions the staff should	be aware of? YES/NO	O If YES, plea
describe			
Parent/Guardian Signature	Da	 te	



CAMBRIDGE PRIDE

BASKETBALL TRYOUTS

Sponsored by the Department of Human Service Programs Recreation Division

TRYOUT TIMES

Saturday, November 5, 2022

6th Grade: Girls 8 – 10 a.m. • Boys 2 – 4 p.m.

7th Grade: Girls 10 a.m. – 12 p.m. • Boys 4 – 6 p.m.

8th **Grade:** Girls 12 – 2 p.m. • Boys 6 – 8 p.m.

Sunday, November 6, 2022

6th Grade: Girls 8 – 10 a.m. • Boys 2 – 4 p.m.

7th Grade:

Girls 10 a.m. - 12 p.m. • Boys 4 - 6 p.m.

8th Grade:

Girls 12 - 2 p.m. • Boys 6 - 8 p.m.

LOCATION

Frisoli Youth Center

61 Willow St, Cambridge, MA 02141

CONTACT

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