



**ISC Basketball Registration 2017-18**  
**Fifth Grade Boys**  
**Fourth and Fifth Grade Girls**

Student: \_\_\_\_\_

Grade and Teacher: \_\_\_\_\_

Parent: \_\_\_\_\_

Parent Email: \_\_\_\_\_

Parent cell phone number: \_\_\_\_\_

Does cell phone accept text messages? Y N

Who is the first person to contact for student? If not same as above, please provide name and contact information:

\_\_\_\_\_

**Uniforms**

All students will receive a new uniform this season.

Circle size: YS YM YL AS AM AL

**Health Information**

Please let us know if your child has a medical condition such as asthma or allergy. Specify what it is and how it is treated:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Payment**

Please make checks payable to Bright School for \$115.

**Turn in form to the office to the attention of Stacie Helton by  
November 13.**