



# Monroe Special Sports

## Basketball Pals



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2011

Our Staff, Coaches, Buddies, and Volunteers need to have as much information as possible to ensure a safe and successful experience for your child. Please fill out the forms as completely as you can.

### PLEASE PRINT CLEARLY

Player's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Checked often? \_\_\_\_\_

Phone: \_\_\_\_\_ Cell \_\_\_\_\_ T-Shirt Size \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

What is the most important thing we should know about your child?

\_\_\_\_\_

Can we contact you if we have more questions? \_\_\_\_\_ Is your child verbal? \_\_\_\_\_

Are there any behavioral concerns we should be aware of?

\_\_\_\_\_

What is the best way to redirect your child? \_\_\_\_\_

Can your child follow simple directions? \_\_\_\_\_

Has your child ever played any sport on a team? \_\_\_\_\_ If yes, what sport? \_\_\_\_\_

Has your child ever played basketball? \_\_\_\_\_ Where? \_\_\_\_\_

What limitations does your child have, if any? \_\_\_\_\_

What is the best way to get your child to cooperate and participate?

\_\_\_\_\_

Does your child work better with a male/female buddy? \_\_\_\_\_

A good match would be close to your child's age or much older? \_\_\_\_\_

(We will make every effort to try and match buddies/players.)

Does your child do best when: Not touched? \_\_\_\_\_ Kept busy? \_\_\_\_\_ Directions explained repeatedly? \_\_\_\_\_

Social clues explained and reinforced? \_\_\_\_\_ Visually shown what to do? \_\_\_\_\_ Worked with hand over hand? \_\_\_\_\_ Other \_\_\_\_\_

Is there any medical issues we need to be aware of? \_\_\_\_\_ On Medications? \_\_\_\_\_

- I accept the terms of the photo release.

Signature: \_\_\_\_\_

If there is anything else you think we need to know please continue on back or contact us directly.

Date \_\_\_\_\_ Fee Paid: \_\_\_\_\_ Please make checks payable to: Monroe Special Sports - \$10.