



**Registration**

Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Grade 2008/2009: \_\_\_\_\_ Birthday: \_\_\_\_\_ Age: \_\_\_\_\_

T-Shirt Size: \_\_\_\_\_ How did you hear about us? \_\_\_\_\_

**Emergency Contact**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Program Name:** \_\_\_\_\_

Program Day: \_\_\_\_\_ Time: \_\_\_\_\_

**Program Name:** \_\_\_\_\_

Program Day: \_\_\_\_\_ Time: \_\_\_\_\_

I am paying by check \_\_\_\_\_ I am paying by Credit Card \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Exp \_\_\_\_\_

Mail Registrations to:  
Omaha Sports Academy  
11726 Stonegate Cir  
Omaha, NE 68164

Omaha Sports Academy may use a picture from the above program in future publicity pieces. If you have questions or concerns please contact Bob Franzese at bob.franzese@omahasportsacademy.com or 402-504-1222.

**OFFICE USE ONLY**  
Initials: \_\_\_\_\_  
Date: \_\_\_\_\_

