

**ROLLVERINES BASKETBALL**

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Our Jr. Wheelchair basketball team is open to youth with physical impairments limiting their ability to participate in able-bodied basketball.  
Recreational & Competition Teams  
 **Weekly Practices:**  
**Mondays   
6:00 - 7:30 PM  
Peace Lutheran  
8260 Jackson Rd.,  
Ann Arbor**

Sport wheelchairs provided

2018-2019 practice schedule

**Consider joining us at a practice or clinic!**  
[PMR-UMAISETR@UMICH.EDU](mailto:PMR-UMAISETR@UMICH.EDU)  
Please contact us with any questions

**Please Join Us!   
Our Team is always welcoming new members!**



REGISTRATION INFORMATION

Participant’s Name: Click or tap here to enter text. Date of Birth: Click or tap here to enter text.

Parent/Guardian Name (if under 18 yo): Click or tap here to enter text.

Best Contact ph # : Click or tap here to enter text. Email Address: Click or tap here to enter text.

Additional Emergency Contact(s)/Relation: Click or tap here to enter text.

Participant or Parent/Guardian address: Click or tap here to enter text.

Special considerations/Allergies: Click or tap here to enter text.

Does participant use assistive device (wheelchair, crutches, walker) for mobility? If yes, please explain.   
Click or tap here to enter text.

In the event that I am unavailable, I authorize Michigan Medicine staff to seek medical treatment for me/my child. YES  NO  Initial Here: Click or tap here to enter text.

PCP/Pediatrician name and phone number: Click or tap here to enter text.

\*\*We utilize **Mobilize** for communication (app available for iPhone/Android; also works with text message or email)  
Phone Number (if different from above): Click or tap here to enter text.   
Email (if different from above): Click or tap here to enter text.  
  
I authorize UMAISE representatives to contact me via mobilize/email/text message: YES  NO   
  
Click or tap here to enter text.

Signature of participant or Parent/Guardian (if under 18 yo) Check if e-signed  Date Click or tap to enter a date.