



**POLICE ATHLETIC LEAGUE
OF BUFFALO, INC.**



Byron W. Brown
Mayor

BOY'S FALL VARSITY HIGH SCHOOL BASKETBALL

TEAM/COACH REGISTRATION FORM

DATE _____/_____/_____

PLEASE MAIL BACK A.S.A.P WITH YOUR PAYMENT

FEE: \$295.00

PLEASE CHECK: WEDNESDAY THURSDAY

TEAM NAME _____

COACHES NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ CELL _____ EMAIL _____

TEAM FEE INCLUDED: YES NO

CHECK# _____ MADE PAYABLE TO: PAL

CREDIT CARD PAYMENT WAS PHONED IN TO 851-4615

MAIL COMPLETED APPLICATION & CHECK TO:

**PAL of Buffalo
65 Niagara Square,
21st Floor**

**Credit card payments
may be called into the
PAL Office – 851-4615**

Orv Cott - Cell Phone 812-7251

Buffalo, NY 14202

Upon receipt of payment and Team/Coach Registration Form, the following package will be sent to you including:

1. Team Roster
2. Individual Player Forms
3. Rules

Schedules will be presented in package for entire team at 1st game. Teams will be notified verbally for 1st game.