

SOUTHWESTERN OHIO BASKETBALL

2026 SUMMER LEAGUE

Team Name: _____

E-Mail Address: _____ *Day* _____

Division: Boys	2	3	4	5	6	7	8	9/10	11/12
Girls		3	4	5	6	7	8	HS	

Coach: _____ **Phone:** _____

Address: _____

Cell: _____

Fax: _____

Asst Coach: _____ **Phone:** _____

Asst Coach: _____ **Phone:** _____

Player: _____ **Email:** _____ **Grade:** _____ **Birthdate:** _____
