



2017-18 Youth Basketball Registration Form
REGISTRATION DEADLINE: Thursday, November 9, 2017

Athlete's Name _____ Male: _____ Female: _____

Date of Birth: ____/____/____ Age as of 12/01/2017: _____

Jersey Size (Circle One): Youth: S M L Adult: S M L XL 2XL

Shorts Size (Circle One): Youth: S M L Adult: S M L XL 2XL

Preferred Jersey Number: _____ Grade: _____

Would You Like to Coach? Yes: _____ No: _____

*Phone Number (_____) _____ - _____ *Email: _____

Address: _____

Emergency Contact Number: _____ Relationship: _____

Phone Number: _____ Secondary: _____

A copy of your child's birth certificate is required before your child is considered eligible to participate.

Individual Registration & Uniform Fee (Bluefield Resident): \$60.00 (Multiple Child \$50)
Team Registration Fee (non-resident team – NO uniform): \$300.00
(Early Bird Registration \$55 by October 23rd) (Multiple Child \$45)

Age Divisions:

Itty-Bitty – (5-7) Evaluations: Nov 7th Draft: Nov-12th
 Pee-Wee – (8-10) Evaluations: Nov 8th Draft: Nov-12th
 Midget – (11-13) Evaluations: Nov 9th – Draft: Nov-12th

All Evaluations will begin at 6 PM

Waiver of Liability Release Form

I am aware of the nature of this activity and I hereby assume responsibility for _____
 (Participant's Name)

to participate and to be photographed for publicity purposes. I will not hold the CITY OF BLUEFIELD DEPARTMENT OF PARKS AND RECREATION and/or its employees responsible in the case of accident or injury as a result of this participation. I understand that this completed form must be in the possession of the City of Bluefield Department of Parks and Recreation prior to participation in this program.

Parent/Legal Guardian Signature _____ Date: _____

For Office Use Only

Amount Paid: _____ Cash: _____ Check: _____ Receipt \$: _____ Received by: _____ Date: _____