



2016-2017 ATASCADERO YOUTH BASKETBALL LEAGUE



Registration Deadline: October 14th

Cost: \$92 residents, \$101 non-residents (\$10 late fee after 10/14/16)

Select Grade/Division (check one):

- 1st & 2nd Coed 3rd & 4th Boys
 3rd & 4th Girls 5th & 6th Boys
 5th & 6th Girls 7th & 8th Boys
 7th & 8th Girls High School

Select Shirt Size (check one):

- Youth Small Adult Small
 Youth Medium Adult Medium
 Youth Large Adult Large
 Adult X-Large

Experience (check all that apply):

- Child has played in Atascadero Rec League before
 Child has played on a Club or Travel Basketball Team before
 Child has never played before

AGE: _____

Player Name: _____ Birth Date: _____ Gender: M F

Address: _____ City: _____

School: _____ Parent Email (required): _____

Mother's Name: _____ Father's Name: _____

Home Phone #: (Mother) _____ (Father) _____

Cell Phone #: (Mother) _____ (Father) _____

Emergency Contact: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Allergies: _____ Medical Conditions: _____

CHILD'S HEIGHT: _____

CHILD'S WEIGHT: _____

GRADE: _____

COACHING INFORMATION

Yes, I would like to help! Head Coach Asst. Coach

Name of person volunteering: _____ Phone #: _____

Email Address: _____ Have you filled out a coaching application: Y N

TEAM SPONSOR INFORMATION

Yes, I would like to sponsor! (each team is responsible to secure a team sponsor)

Name of sponsor: _____ Phone #: _____

Email Address: _____ Have you filled out a sponsor application: Y N

Office Use Only

Activity # 6300.601

Paid \$ _____

Date: _____

Scholarship (circle)

****TURN OVER****

RELEASES OF LIABILITY FOR MINOR PARTICIPANTS

PLEASE READ CAREFULLY & COMPLETELY

I/we hereby grant consent to any and all health care providers designated by the City of Atascadero, Department of Community Services, Recreation Division to provide my child any necessary medical care as a result of any injury/illness. This consent includes First Aid and transportation to/from health care providers.

Signature of Parent or Guardian

Date

IN CONSIDERATION OF _____, my minor child/ward ("my child"), being allowed to participate in any way in the City of Atascadero, Department of Community Services, Recreation Division Youth Sports Program, related events and activities,

The undersigned acknowledges, appreciates and agrees that:

1. The risk of injury to my child from the activities involved in these programs is significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. FOR MYSELF, SPOUSE AND CHILD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISK both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE CITY OF ATASCADERO or other, and assume full responsibility for my child's participation; and,
3. I willing agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from participation and bring such attention to the nearest official immediately; and,
4. I, for myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE THE other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owner and lessors of premises used to conduct the event (Releases), WITH RESPECT TO ANY AND ALL INJURY DISABILITY, DEATH, or loss or damage to person or property incident to my child's involvement or participation in the programs, WHETHER ARISING FROM THEIR NEGLIGENCE OF CITY OF ATASCADERO OR OTHERWISE, to the fullest extent permitted by law.
5. I, for myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin HEREBY INDEMNIFY AND HOLD HARMLESS all above Release from any and all liabilities incidents to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

(PARENT / GUARDIAN SIGNATURE)

(PRINT NAME)

Date Signed: _____

UNDERSTANDING OF RISK

I understand the seriousness of the risk involved by participating in this program, my personal responsibilities for adhering to rules and regulations, and accept them as a participant.

(PARENT / GUARDIAN SIGNATURE)

(PRINT NAME)

Dated Signed: _____

PLEASE MAKE CHECKS PAYABLE TO: CITY OF ATASCADERO