



2017 Registration Form
Boys and Girls BASKETBALL
REGISTRATION DEADLINE IS WEDNESDAY, DEC. 7, 2016.

Participation is not guaranteed for late registrants.
Please Print

My child played basketball with Edgewood in 2016 (last season)

Player Name: _____ Birth Date: _____

Address: _____
Street City State Zip

Gender (circle): M F Age Division: 6-8 9-11 12-14

Shirt size: Youth Small____ Youth Medium____ Youth Large____
 Adult Small____ Adult Medium____ Adult Large____ Adult XL____

Parent/Guardian Name(s): _____

Phone: (Primary) _____ (Secondary) _____ (Third) _____

Parents email address: _____

EDGEWOOD BASKETBALL IS RUN BY VOLUNTEERS!

Take an active role by volunteering for one of the following positions:

Coach: _____ (provide shirt size) **Asst. Coach:** _____ **Banquet Help:** _____ **Fundraising:** _____

Basketball Information:

- All Games and practices are held in the Edgewood Primary School gym. Team Play begins in January 2017.
- ~~W~~ Draft+Day (when teams are chosen) will be Wednesday, December 14, 2016 at the Edgewood Primary gym.
- Please arrive at the following times according to age group:
 - 6pm for ages 6-8
 - 7pm for ages 9-11
 - 8pm for ages 12-14
- Volunteer Coaches will meet during the Draft Times listed above. The practices will take place on Edgewood Primary School one evening during the week. You will be contacted by your child's coach with a scheduled practice time. Games are Saturday mornings at Edgewood Primary School in January, February and early March.

Make checks payable to Edgewood Borough
Fee: \$60.00

Return to: Recreation
 2 Race Street
 Edgewood, PA 15218

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MEDICAL INFORMATION

Doctor _____ Phone _____ Ins. Co. _____
Address _____ Policy No. _____
Does this child have any medical considerations? _____

Two alternative emergency contacts (not parents' cell numbers)
Name _____ Relation _____ Phone _____
Name _____ Relation _____ Phone _____

I/We the parent/guardians of the above-named player, hereby give my/our permission to participate in any and all basketball activities, including transportation to and from the activities. I/We further certify that the player is of the age represented on this form, and has health/accident insurance as indicated on this form. MEDICAL: I, the undersigned, as parent/guardian of the above-mentioned applicant do hereby give my permission and approval to the applicant's participation in all the Edgewood Basketball activities during the Winter 2015-2016 season. I further agree to assume all risks and hazards incidental to such participation, and I do hereby waive, release, and absolve the organizers, board members, helping parents, sponsors, supervisors, referees, coaches and participants from any claim arising out of injury to the applicant, my son or daughter or ward.

Parent/Guardian Name (print) Parent/Guardian Signature Date

Edgewood Basketball does not limit participation in its activities on the basis of disability, race, color, creed, national origin, gender, or religious preference.

I/We the parents/guardian of the above-named candidate for a position on an Edgewood team hereby give my/our approval to participate in any and all league activities. I/We assume all risk and hazards incidental to such participation, including transportation to and from the activities. I/We do hereby waive, release, absolve, indemnify, and agree to hold harmless Edgewood, the chartering organization, the organizers, sponsors, participants and persons transporting my/our child to and from activities for any claim arising from an injury to my/our child, whether the result of negligence or from any other cause, except to the extent of the amount covered by accident and liability insurance. I/We understand that the insurance carried by the league covers only the amount that is not paid by my/our carrier. I/We agree to return upon request the uniform and other equipment issued to my/our child in as good condition as when issued except for normal wear and tear.

In addition to the RELEASE OF ALL CLAIMS, I/we also understand that bad sportsmanship and the use of profanity WILL NOT be tolerated by the Edgewood Recreation Department and will result in the ejection of any persons, including players, parents, and coaches who exhibit foul behavior.

Parent/Guardian Signature _____ Date _____

Please Note: Players interested in participating after the deadline date must be cleared to play by the Recreation Coordinator. Coaches may not add players independently. Proof of age may be requested.