

Lohff-Schumann 3rd-6th Grade Basketball Registration

Registration forms due October 18th

Competitor/Child's Full Name: _____ M/F _____

Child's Date of Birth: ____/____/____ Current Grade: _____

Father's Name: _____ Phone #: _____

Mother's Name: _____ Phone #: _____

Home Address: _____ City: _____ St: _____ Zip: _____

Email Address: _____

Emergency Contacts: (If parents cannot be contacted) Name: _____

Phone: _____

Jersey Size (Circle one): YS YM YL YXL AS AM AL AXL

Please circle any activities parents would like to participate in:

Coach: (yes or no) _____ Person Volunteering: _____

Coach Email: _____

Registration Fee: \$35 for members - \$40 for non-members

Jersey Deposit \$50 (separate checks please) Return jerseys by February 16th, 2024

Practice will begin as soon as teams are assigned. The games will be every Saturday in January. This is a traveling league. Each division will play both home and away games. Jerseys will be turned in at the end of the season, if the jersey is damaged or not returned at all, you will be charged your \$50 deposit to have it replaced. **WAIVER:** I give permission for my child, listed on this registration form, to participate in the Youth Basketball Program. I understand that it is the parent's responsibility to provide any needed insurance and hereby release the Youth League, Community School, Association, Board Members, Coaches, and Umpires from any liability associated with any injury my child may receive while participating in scheduled practices, games, or tournaments. **STATEMENT OF UNDERSTANDING:** I understand that it is the parent's responsibility to provide transportation to/from practices and games. I further understand that registration fees are due at the time of registration and parents are required to assist with location cleanliness.

Parent's Signature: _____ Date: _____