



11 - 12 Girls

Name of staff:	_____
Date:	_____ Fee: _____
Amount Paid:	_____
Method:	_____
Receipt Book#	_____

Registration Number _____ Returning Player Yes ___ No ___

Player's Last Name: _____ First Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____ Sex: _____ Age _____

Birth Date: _____ BC# _____

Shirt size YS ___ YM ___ YL ___ AS ___ AM ___ ALG ___ AXLG ___ AXXL ___

School: _____ Email: _____

Father's Last Name: _____ First Name: _____

Address: _____ Home Phone: _____

Cell: _____ Will parent coach a team _____

Mother's Last Name: _____ First name: _____

Address: _____ Home Phone: _____

Cell: _____ Will parent coach a team _____

Emergency Contact: _____ Phone: _____ Cell: _____

WAIVER

I give permission for my son/daughter to participate in the Roswell Basketball League sponsored by Roswell Recreation Department and all activities involved with the program. It is understood that I waive and release any and all rights and claims for damages which I or my heirs may have against the City of Roswell, and all sponsors, and any of the their agents, representatives and assignees, for any and all injuries, loss or damages which may occur while my son or daughter is a participant in the program. I realize that there is inherent risk in these activities and I am willing to accept the results of those risks. I also agree in registering my child for the Basketball League, and accept the team my child is placed on.

PHOTO/VIDEO RELEASE

I understand that as a participant, myself or my child may be photographed and/or videotaped during participation in the City of Roswell Parks and Recreation activities. These photos/videos may be used in presentations and/or promotional material. By signing, I release the City of Roswell to use these photos and/or videos.

Team Placement Agreement

In registering my child for the Youth Basketball League, I agree to accept the team my child is placed on.

Parent/Guardian: _____ Date: _____