

The Christian Center Basketball Program



Cost: **UNTIL** October 2
 First player pays \$65
 Second player pays \$60
 Third player pays \$55

Cost: **AFTER** October 2
 First player pays \$75
 Second player pays \$70
 Third player pays \$65

Amount Pd. _____
 Gid. _____
 Sch. _____
 Fundr. _____
 Payment Type _____

• If a player withdraws from the league a \$5 cancellation fee will be deducted from your refund.

LEAGUES

- **Beginner** 5 Year Olds (only) 8ft rims
- **Rookie** 1st & 2nd grade 8ft rims
- **I.B.L** 3rd & 4th grade

- **A.B.L** 5th & 6th grade
- **J.B.L** 7th & 8th grade
- **C.C.B.A** 9th - 12th grade

• A player can be placed in a more advanced league based on request.

LEAGUE REQUEST _____
 (Choose from list above)

SKILL LEVEL (Circle One)				
1	2	3	4	5
Outstanding	Skilled	Average	Below Average	Not Athletic

- Each participant must have a separate form.
- Please print

PLAYER'S NAME: _____ **CIRCLE ONE: MALE / FEMALE**

PHONE: _____ **ADDRESS:** _____

CITY: _____ **STATE:** _____ **ZIP:** _____

EMAIL : _____

BIRTHDATE: ____/____/____ **HEIGHT** (5th-12th grade) ____ **FT** ____ **IN**

• *Beginners: A player must turn age 5 by March 1, 2019.*

• *CCBA (High School): A player cannot exceed the age of 18 before March 1, 2019 and must still be in High School.*

• • • *If your child wears an Adult XL or larger mark the size here.* _____

FATHER'S NAME: _____ **MOTHER'S NAME:** _____

ADDRESS IF DIFFERENT FROM PLAYER: _____

PLACE OF EMPLOYMENT FATHER: _____ **MOTHER:** _____

EMERGENCY CONTACT & PHONE: _____

SCHOOL ATTENDING: _____ **CHURCH ATTENDING:** _____

WHAT IS THE CONDITION OF YOUR CHILD'S HEALTH? _____

IS YOUR CHILD ON ANY SPECIAL MEDICATION ? **CIRCLE ONE: YES NO**

IF SO, WHAT? _____ **FOR WHAT?** _____

Did your child play Christian Center Basketball last year? **CIRCLE ONE: YES NO**

If yes....what team? _____ **What League?** _____

• **TEAMMATE REQUEST (ONLY 1 request permitted)**

Friend requested: _____ • This friend must also request your child on their form.

• Teammate requests are not guaranteed.

• Requests will be considered by the Athletic Director in the best interests of the league.

• • Please read & sign the back side of form • •

Attention!!!

Teammate Requests

- A parent may request **1 friend** to play on their son or daughter's team. That friend must also request your child on their form.
- Friend requests are not guaranteed.
- Any effort to place **several friends** on a team will **not be honored** and may lead to **none** of the friends being on the same team.
- If your child remains in the same league, he/she is **not guaranteed** to be on the same team as they were last season.
- If you need to have your child on a team with a friend for transportation needs, make sure to write down that friend as your **1 allowed request**.
- Brothers and sisters in the same league will be placed on the same team. Make sure to write on the top of the registration form that brothers/sisters are in the same league.

All teammate requests will be *considered* by the Athletic Director in the best interests of the program.

Fund-raising

The Christian Center Athletic Dept. conducts a fund-raising event for each sport. These fund-raisers help keep the registration fees down and defer the costs of running our ministry programs. Although it is not a requirement that your child (children) participate, your help is greatly appreciated. The Christian Center also accepts donations in lieu of the fund-raising, and we also offer the Team Center Program, which is a monthly partnership with The Center that will allow your children to play all sports for free. Call the office 685-4218 ext.101 for more details. The Christian Center Athletic Dept would like to take this time to thank our players and their families for supporting us and helping our programs grow.

The Christian Center Basketball Program (A Program of The Christian Center, Inc.)

Release, Waiver of Liability and Indemnity Agreement

The undersigned hereby enters The Christian Center Ball "Program", and desires to participate in practices, games and related activities carried on by said Program. The undersigned recognizes and acknowledges that there are certain risks of physical injury present but in consideration hereof hereby agree to assume the full risk of any such injury, including death, damages or other loss of whatsoever kind or nature which may be sustained as a result of participation in any and all activities connected with or associated with the Program. In further consideration hereof, the undersigned, their heirs, executors, administrators, successors and assigns, hereby release, waive, discharge and covenant not to sue The Christian Center Youth Athletic Committee, its members, coordinators, coaches, officials, agents and employees, and The Christian Center, Inc., its officers, directors, committee members, successors, attorneys, agents and employees (hereinafter referred to as "releasees") from any and all liability to the undersigned, their heirs, executors, administrators, and assigns, for loss or damage of whatsoever kind or nature on account of or arising out of any injury to the person or property or resulting in death as stated above, whether caused by the negligence or wrongful conduct of the releasees named herein or otherwise, while participating in or in attendance at any ball game, practice, training session, fund-raising event or award trip, on Christian Center property or elsewhere, including but not limited to any such injury, property damage or death incurred while traveling to and from any such event. In further consideration hereof, the undersigned, their heirs, executors, administrators, successors and assigns, hereby agree to indemnify and hold harmless the releasees named herein from any and all loss, liability, damage or expenses, including attorney fees and costs, that they may incur due to any such injury to the person or property or resulting in death, as stated above, whether caused by the negligence or wrongful conduct of the releasees named herein or otherwise. In case of accident or illness, the undersigned hereby authorizes THE CHRISTIAN CENTER to approve emergency medical treatment provided by qualified medical personnel. The undersigned has read and fully understands the above Release, Waiver of Liability and Indemnity Agreement, and further agree that no oral representations, statements or inducements apart from the foregoing written agreement have been made.

I give my permission for _____ to participate in

The Christian Center Athletic Program, and consent to the use of photographs of my minor/child, in Christian Center brochures, social media, advertisements, etc. No names will be used without permission of a parent or guardian.

Signature

(Parent / Guardian if participant is a minor)

Date