

2019 Fall Boys & Girls Basketball LEAGUE

This will be a recreation league, with teams forming in NK and surrounding communities.
 Divisions for all boys and girls, grades 3rd through 8th.



Please mail completed form to:
 City of Poulsbo P&R Basketball,
 200 NE Moe Str., Poulsbo, WA 98370

FOR MORE INFO, CALL
City of Poulsbo Parks and Recreation

360-779-9898

Fax: 360-779-5917 or contact by email to:
jschiel@cityofpoulsbo.com

Fee: \$105
Jersey, if needed: \$25

This registration is for a:
BOY GIRL
CIRCLE ONE
 Coach or buddy requests?

Moms and Dads!
Are you interested in coaching a team?

If you have some free time that you can contribute to a very exciting (and potential long time hobby!) please give us a call! The kids really do benefit from our efforts and so will you!

Please contact Joe at P&R;
360-731-1938, or jschiel@cityofpoulsbo.com

_____ PRINT FULL NAME CLEARLY		_____ GRADE	
_____ PLAYER ADDRESS/CITY/ZIP			
_____ HOME PHONE	_____ AGE	_____ BIRTHDATE	_____ SCHOOL ATTENDED
PARENTS - Please print legibly!		Jersey SIZE, if needed. Youth: S/M/L or Adult S/M/L/XL	
Email: _____			

____ Parent Initials here indicating review of concussion and Sudden Cardiac Arrest information, as provided on the City of Poulsbo Sports website:
<https://www.cityofpoulsbo.com/parks/documents/concussioninformation.pdf> &
https://www.cityofpoulsbo.com/parks/documents/sudden_cardiac_arrest_Flyer5.pdf

Parental/Legal Guardian Assumption of Risk, Waiver and Release

I (we) am/are the parent(s) or legal guardian of _____ (Child's Name) who desires to be a participant in the City of Poulsbo's sponsored recreational activity of

BASKETBALL Team and league practices and games _____ (Describe)

It is important to me (us) that this child be allowed to participate in this activity. I (we) understand there are special dangers and risks inherent in this activity, including but not limited to, the risk of serious physical injury, death or other harmful consequences which may arise directly or indirectly from the child's participation in this activity. Being fully informed as to these risks and in consideration of the City of Poulsbo allowing my child to participate in this sponsored activity and/or use of the City of Poulsbo's facilities I (we), on behalf of myself (ourselves) and on behalf of the above-named participant child, assume all risk of injury, damage and harm to the child which may arise from the child's participation in the activities or use of the City of Poulsbo's facilities. I (we) further agree, individually and on behalf of the above-named child, to release and hold harmless the City of Poulsbo, its officials, employees, volunteers and agents and agree to waive any right of recovery that I (we) may have to bring a claim or lawsuit for damages against them for any personal injury, death or other harmful consequences occurring to the above-named child or me arising out of the Child's voluntary participation in this activity. I (we) grant my (our) full and voluntary consent for the above-named child to participate in the activity described.

I hereby consent to allow my child's picture or likeness to appear in any official document, Member website, sponsor advertisement and/or Member produced television coverage of sponsored recreational activity without compensation to me.

_____ Parent(s) / Legal Guardian Signature(s)		_____ Date	_____ Parent(s) / Legal Guardian Printed Name(s)		_____ Date
_____ Parent(s) / Legal Guardian Address		_____ Email	_____ Phone/cell		_____ Phone
_____ Child Participant Address		_____ Phone			