

Harleysville Summer Basketball League

2009 Summer Season - Boys Entering 5th - 8th grades

Must Be under 14 years old on 6/1/09

5th and 6th grade(lower division)/7th and 8th grade (upper division)

LIMITED TO THE FIRST 10 TEAMS OR 100 PLAYERS IN EACH DIVISION

(PLEASE PRINT)

Child's Name: _____ Phone: (____) _____

Address: _____

Age as of Jun 19th this year _____ D.O.B. ____/____/____ Height: _____

Mother's Name: _____ Father's Name: _____

E-mail Addresses: _____

How would you rate the players overall basketball ability (1-5 with 5 being most skilled) _____

Coach's Name if you are submitting this form with an full team _____

Interested in attending a basketball camp for half days during the season?

Yes No Possibly

Please check one or more of the blocks below if you are willing to help in the upcoming season.

- Coach
 Team Sponsor (\$60.00 per team)

The Harleysville Summer Basketball League will not be held responsible for injuries.

I acknowledge that I have been informed that accidents and/or injuries can result from and during activities sponsored by Harleysville Summer Basketball League, including, but not limited to, the playing of basketball. Such activities could include, but are not necessarily limited to physical training, exercise, running, and hard courts in our area parks.

I accept that Harleysville Summer Basketball League strives to provide competent adult leadership and guidelines, and makes every effort to conduct it's activities in a safe and proper manner, but I also recognize that injuries can occur despite the most careful and reasonable leadership and supervision.

In consideration of my desire and intention to have the minor listed on the sign up form participate in the activities of Harleysville Summer Basketball League, I hereby release and hold harmless same, as well as it's leadership, members, coaches, referees, agents and assigns, from any and all causes of action and claims for injury or damage arising out of my, or the minor listed's participation.

I have been informed by the membership of Harleysville Summer Basketball League that the League maintains and has in effect certain commercial liability insurance. I further understand that this insurance is for the protection of the league from law suits and is not designed, nor intended to provide medical, health, accident nor disability income protection for the minor listed on the sign up form, nor any of the other members.

I have made certain that the listed minor is covered under an effective health insurance and/or accident policy.

BY MY SIGNATURE I AGREE AND ATTEST TO THE ABOVE

Parent or Legal Guardian Date

REGISTRATION FEE OF \$60.00 REQUIRED – CHECK or MONEY ORDER PAYABLE TO HARLEYSVILLE SUMMER BASKETBALL LEAGUE AND CAN BE MAILED TO P.O. BOX 432, HARLEYSVILLE, PA 19438