



Youth Co-Ed Basketball 2018 Registration Form



Participant Name: _____

Date of Birth: _____ Grade: _____ Male / Female

Parent/guardian Name(s): _____

Mailing Address: _____
Street City State Zip

Phone Number: _____
Day Evening

Email Address: _____

Preferred Non-emergency contact method: Text / Phone / Email

Emergency Contacts:

1. Name: _____ Relationship: _____

Phone: _____
Day Evening

2. Name: _____ Relationship: _____

Phone: _____
Day Evening

Waiver and Release:

I understand that physical activities, registered classes, leagues, programs, and basketball in particular, have an element of hazard or inherent danger. I take full responsibility for the actions and physical condition of the minor listed above. I agree to be solely responsible for the safety of the minor listed above. I agree to indemnify and hold Gilpin County, its officers, employees, agents, representatives, and contractors harmless from any liability, loss, cost or expense (including attorney's fees, medical and ambulance costs) that my child may incur while participating in county recreational activities. I give my consent to use any photographs or video taken of the minor listed above in future promotional or marketing materials. This waiver and release is given in the interest of permitting Gilpin County to continue serving the health and fitness needs of the community. My waiver and release is given in exchange for my child's participation in Gilpin County programs. I understand this waiver and release has no expiration date.

Parent/guardian Signature: _____ Date: _____

Medical Release:

Gilpin County Parks and Recreation will make every effort to provide reasonable accommodations necessary to ensure that the program is accessible and available to persons with disabilities. Employees and volunteers will be sensitive to the needs and requirements of the disabled and will ask if assistance is needed. If your child has any special needs, please notify staff so that we can properly accommodate your child. All children will be assessed on a case-by-case basis.

Describe any recurrent health problems, medical conditions (such as asthma, seizures, ear infections, diabetes, etc.), disabilities, chronic illness, hospitalization, or concerns with development:

- None
 - Describe (please include instructions to staff/coaches)
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I, _____ (parent/guardian) give permission to staff or volunteers of Gilpin County Parks and Recreation to secure emergency transportation, medical and/or surgical treatment for the above-named minor while in their care. It is understood that the personnel will make a conscientious effort to locate the parent/guardians and emergency contacts listed on the registration document before any action will be taken. If it is not possible to locate emergency contacts listed, treatment will not be delayed. I will accept all expenses of such care.

Parent/Guardian Signature: _____ Date: _____

Additional Information

Need Jersey: Yes / No If no, current jersey number: _____

Jersey Size: YS YM YL AS AM AL

Registration Fee Included: \$ _____ CASH / CHECK

If you use a jersey from our league from a past year, you may take \$5 off of your registration fee.

Fees and League Information

- Registration fee is due with registration form.
- Early Registration: December 11th – January 3rd
 - o \$50 for first participant | \$45 per additional participant, per household
- Late Registration: January 4th – January 12th
 - o \$65 for first participant | \$60 per additional participant, per household
- Teams will be determined by age groups. All teams will be Co-Ed unless registration numbers allow for separate teams.
- Tentative age groups are U7 (5 – 6 years old), U9 (7 – 8 y/o), U11 (9 – 10 y/o), U13 (11 – 12 y/o) and U15 (13 – 14 y/o)
- Practices will be held at least twice weekly. Practice schedules to be determined.
- Games will be played on Saturdays beginning January 27th. Six games in the season. Final game schedules will be available the week after registration ends. Games will begin at approximately 9:30a.m.
- Medals and a post-season banquet will be provided by the league. Date TBA.