



Greece Basketball Association

House & Select Registration 2009-2010

www.greecebasketball.com

Boys Grades: 3rd – 9th, Girls Grades: 3rd – 8th

Registrations are limited and dependent on gym availability. House registrations will be accepted on a first come, first serve basis. Select participation is based on team tryouts.

REGISTRATION FEES: _____ **House Fee (\$130)** _____ **Select Fee (\$250)***

**Note: \$130 of Select Fee is due at Registration. Remaining \$120 is due after making a team.*

'EARLY' REGISTRATON FEES: _____ **House Fee (\$120)** plus you will receive a GBA decal

- Fee includes a \$10.00 non-refundable processing charge
- Returned Check fee is \$20.00
- **Absolutely No Refunds after Oct. 1st**

PARTICIPANT INFORMATION

Player's Name: _____ Date of Birth: ____/____/____

Address: _____ City: _____ Zip Code: _____

School: _____ Grade (2009-2010): _____ Boy _____ Girl _____

Home Phone: _____ Cell Phone: _____ Parent Email: _____

Shirt Size (YM - AXL): _____ Weeknight (M-F) unavailable for practice (one conflict only): _____

GBA will need some new coaches this year. Please consider volunteering. GBA needs and appreciates your continued support of our Youth program!

I would consider Coaching: Yes No I would consider Ass't. Coach: Yes No

GENERAL/MEDICAL RELEASE – MUST BE SIGNED BEFORE LEAGUE PARTICIPATION

I/We hereby acknowledge that participation in basketball competition carries with it potential hazard. I/We therefore, release the Greece Basketball Association, it's team coaches, the Association officers, the Town of Greece, NY, and the Greece Central School District, as well as all tournament hosting clubs officers, tournament site municipalities and school districts, from any liability in the event of injury or illness suffered while playing for the Greece Basketball Association, in league or tournament games.

If the above named basketball player should become ill, or sustain an injury, and a parent or guardian cannot be contacted, permission is granted to call a licensed physician for treatment, or to transport the above named participant to a hospital emergency room for treatment.

Parents' Names: _____ Parent Signature: _____ Date: _____