

CITY RESIDENT_



For Office	Use Only:
	Non-Draft
Playing Age	
League	
Reg. Pd Ye	es No
Staff Initia	ls

OWN CITY PROPERTY_

2014-2015 YOUTH BASKETBALL REGISTRATION

THOSE ELIGIBLE TO PARTICIPATE:

37664. All checks must be payable to the City of Kingsport.

*Must be children who are residents of the City of Kingsport, whose parents own property in the City of Kingsport or children who attend Kingsport City Schools. **Please Check One or More of the Following:**

*Parents and/or guardians must complete this form with fee and return to the Civic Auditorium, 1550 Fort Henry Drive, Kingsport, TN

CHILD ATTENDS CITY SCHOOL____

*Parents and/or guardians will be asked to present an ID to verify proof of address upon registration. If a person mails in their registration form, they will need to present a copy of their ID. Also, verification of the child's age may be required upon request.

REGISTRATION	N FEE IS \$20.00 (JERSEY FEE N	IOT INCLUDED)
	Fee may be waived under special circumstance	
		T BE WAIVED. A ROSTER SPOT WILL
<u>NO.</u>	Γ BE GUARANTEED AFTER DEADL	IINE.
PLEASE CHECK BELOW:	REGISTRATION PERIOD:	EVALUATION:
1. Bantam (Ages 5-6)	Starts: Tues, Sept. 2 – Ends: Fri, Oct 10	N/A
2. Pee Wee Boys (Ages 7-8)	Starts: Tues, Sept. 2 – Ends: Fri, Oct 10	N/A
3. Pee Wee Girls (Ages 7-9)	Starts: Tues, Sept. 2 – Ends: Fri, Oct 10	N/A
4. Rookie Boys (Ages 9-10)	Starts: Tues, Sept. 2 – Ends: Fri, Oct 10	Tues, Oct 21, 6pm, VO Dobbins
5. Junior Girls (Ages 10-12)	Starts: Tues, Sept. 2 – Ends: Fri, Oct 10	Thurs, Oct 23, 6pm, VO Dobbins
6. Junior Boys (Ages 11-12)	Starts: Tues, Sept. 2 – Ends: Fri, Oct 10	Tues, Oct 28, 6pm, VO Dobbins
7. Intermediate Boys (Ages 13-14)	Starts: Mon, Sept. 22 – Ends: Fri, Oct 24	Tues, Nov 4, 6pm, VO Dobbins
8. Senior Girls (Ages 13-15)	Starts: Mon, Sept. 22 – Ends: Fri, Oct 24	
9. Senior Boys (Ages 15-17)	Starts: Mon, Sept. 22 – Ends: Fri, Oct 24	
AGE ON AUG	GUST 1 st , 2014 DETERMINES PI	LAYING AGE
Child's Name	Date of Birth/_	/ Age on 8/1/14
Address	_ Zip Code Home Phone_	Cell Phone
Cell Phone Carrier (For Text Alerts and Pro	ogram Updates): Verizon AT&T	Sprint Other (Specify)
Email Address		Male Female
Did your child play city recreation basketball in	n 2013-2014? If so, what league?	What team?
Does your child have any medical or physical p	problems? If so, please explain:	
School Attending:	• •	
VOLUNTEER COACHES are needed. If in		BG Check
NameAddress		_
Home Phone Cell Pl	noneEmail A	ddress
All volunteer coaches will be required to sign	a consent form in order for a mandator	y annual background check to be conducted.
	RELEASE OF ALL CLAIMS	
I hereby agree to carefully abide by all rules		Recreation. In consideration for the City of
		l its agents and employees from any and all
		e activities. This release and waiver extends to
		n. I further state that I have carefully read the
	nd know its contents, and I sign my name	
(Please PRINT parent / guardian signature)		
(Tease First parent/ guardian signature)		
(Participant's parent / guardian signature)		(Date)
(1 articipant 8 parent/ guardian signature)		(Date)
		(,