

**CO-ED INSTRUCTIONAL**K and 1<sup>st</sup> Grade**\*\* Saturdays – Once per week \*\***

**- Begins Jan. 10<sup>th</sup> – 9am-10am at E-Elbridge Elem.** - Hosted by Varsity Basketball Programs. \$25 per child; All welcome, No teams. Group play.

Divisions \*\*\*These are travel teams\*\*\*

**BOYS**2<sup>nd</sup>/3<sup>rd</sup> \* 4<sup>th</sup> \* 5<sup>th</sup> \* 6<sup>th</sup>

Games begin early Dec.

**BOYS**7<sup>th</sup>\*8<sup>th</sup>

(Games begin early Jan

Reg. deadline: Dec. 10)

**GIRLS**2<sup>nd</sup>/3<sup>rd</sup> \* 4<sup>th</sup> \* 5<sup>th</sup> \* 6<sup>th</sup>

Games begin early Dec.

**GIRLS**7<sup>th</sup>\*8<sup>th</sup>

(Games begin early Nov.

Reg. deadline: Oct. 24)

**PARTICIPANT INFORMATION****\*\*\*Please use a separate form per child please**

Child's Name \_\_\_\_\_

Boy \_\_\_\_\_ Girl \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian \_\_\_\_\_ Parent/Guardian E-Mail \_\_\_\_\_

Phone \_\_\_\_\_ Emergency Phone/Cell \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**VOLUNTEERS NEEDED**

Head Coach \_\_\_\_\_ Assistant Coach \_\_\_\_\_ Referee (HS Students Welcome!!) \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

WAIVER: I, the parent/guardian of the minor registered, hereby give approval for his/her participation in this Town of Elbridge recreation program. The participant is in good physical health and does not suffer any physical or mental problem which would impair his/her ability to participate in this activity. We assume all risks and hazards incidental to such participation and hereby release the Town and its staff of any liability for any personal injury claim which may arise from an injury incurred as a result of such participation except and to the extent that the Town's Participant Insurance may provide medical expense coverage. I further acknowledge that the participant will be required to abide by a standard of conduct for all participants, as will I and my companions who attend events, will also be required to conduct ourselves properly.

Parent/Guardian Signature X \_\_\_\_\_ Date \_\_\_\_\_

**\*\*\*\*\* PLEASE READ AND SIGN OTHER SIDE \*\*\*\*\*****Please Register by****OCTOBER 24, 2025****Registration Information:****MAIL registration form and fee by**

October 24, 2025 to:

Town of Elbridge  
Attn: Recreation  
Department  
PO Box 568  
Jordan, NY 13080

**FEES****Within JE District**

Instructional.....\$25  
2<sup>nd</sup> – 6<sup>th</sup> Grade.....\$50  
7<sup>th</sup> & 8<sup>th</sup>.....\$55

1 2 3 4 Children Registered \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_

Checks Payable to: **J-E Recreation****\*\*\* NOTE: There are no refunds****Please Register by****OCTOBER 24, 2025**Checks Payable to: **J-E Recreation**

## SPORTS PARENT – CODE OF CONDUCT

1. I will not force my child to participate in sports.
2. I will remember that children participate to have fun and the game is for youth.
3. I will inform the coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
4. I will learn the rules of the game and the policies of the league.
5. I (and my guests) will be a positive role model for my child and encourage sportsmanship by showing respect and courtesy and by demonstrating positive support for all players, coaches, officials and spectators.
6. I (and my guests) will not engage in any kind of unsportsmanlike conduct with any official, coach, player or parent such as booing and taunting, refusing to shake hands, or using profane language or gestures.
7. I will not encourage any behaviors or practices that would endanger the health and well being of the athletes.
8. I will teach my child to play by the rules and to resolve conflicts without resorting to hostility or violence.
9. I will demand that my child treat other players, coaches and spectators with respect regardless of race, color, creed, sex or ability.
10. I will teach my child that doing one's best is more important than winning so that my child will never feel defeated by the outcome of a game or his/her performance.
11. I will praise my child for competing fairly and trying hard. I will make my child feel like a winner every time.
12. I will never ridicule or yell at my child or other participants for making a mistake or losing a competition.
13. I will emphasize skill development and practices and how they benefit my child over winning. I will also de-emphasize games and competition in the lower age levels.
14. I will promote the emotional and physical well being of the athletes ahead of any personal desire I may have for my child to win.
15. I will respect the officials and their authority during games and will never question, discuss or confront coaches at the game field and will take time to speak with coaches at an agreed upon time and place.
16. I will demand a sports environment for my child that is free from drugs, tobacco and alcohol and I will refrain from their use at all sports events.
17. I will refrain from coaching my child or other players during games and practices unless I am one of the official coaches of the team.

Print child's name \_\_\_\_\_

X

Parent/Guardian Signature \_\_\_\_\_

Town of Elbridge

## RECREATION



### K-8 Boys & Girls Basketball 2025-2026

**MAIL** registration form and fee  
by October 24, 2025 to:

Town of Elbridge  
Attn: Recreation  
Department  
PO Box 568  
Jordan, NY 13080

Please register by

**OCTOBER 24, 2025**

For more information contact:  
(315) 689-9031 ext 9 or  
[srdirector@townofelbridge.com](mailto:srdirector@townofelbridge.com)  
[www.townofelbridge.com](http://www.townofelbridge.com)