Butte Hoops Basketball Club
Skill Session Registration Form

Registration Fee is $0

Thank you to Uptop Clothing and the Dream Big Foundation for making this possible!

Please submit this registration at the first session or
Send via Email to: teamupbasketball@gmail.com

**This registration is for skill sessions conducted every Sunday.*

Player's Name _____ Parent's Name: _____

Address _____

City _____ Zip _____

Phone _____ ***Email - (print clearly)** _____

Grade Level: _____

Is your child currently on a travel team? ☐ YES ☐ NO

If no, is your child interested in playing on a travel team for the Butte tournaments? ☐ YES ☐ NO

Jersey Size: YM YL AS AM AL AXL AXXL

Preferred Uniform Number (**pick 5** – not guaranteed any specific number): ____, ____, ____, ____, ____

I understand by the nature of activity there is the possibility of accident and I assume the risk and responsibility while my child is participating with Butte Hoops. I, as parent/guardian of a minor student, permit emergency care to be administered to him/her as deemed necessary by the team coaches and administrators. I will allow the involved hospital and/or doctor to administer the required treatment of the emergency condition. I also understand that all incurred costs are my personal responsibility and that Butte Hoops, Team Uptop, School District #1, coaches or representatives do not have insurance coverage for injuries to participants. I also agree to indemnify the Butte Hoops, Team Uptop, School District #1, coaches or representatives from any claim which may hereafter be presented as a result of such injury or illness. All parents and players also agree to abide to the "Butte Hoops Code of Conduct" as published at teamuptopbasketball.com. Violations could be subject to suspension, punishment or removal from all activities.

Signature of parent/guardian X _____

For more information contact Paul McCarthy at: teamuptopbasketball@gmail.com or call 406 490-2598