



San Benito Boys and Girls Club Youth Basketball League

Registration Fee: \$40.00 (T-shirt included)

Late Registration: TBA

Location: San Benito Boys and Girls Club

Starting Date: T.B.D (Approximate date April 1, 2021)

Registration Deadline: March 22, 2021

Payment must be paid in full upon registration to Boys and Girls Club

Rules: Provided to coach at mandatory coach's meeting

Divisions: League divisions will be by grade level. Maximum of 8 players per team. Teams are by school currently attending. Director has final decision.

Add'l Information: Game days will be determined by number of registered participants. Birth certificate required.

Waiver Statement:

The undersigned states that he/she understands that the San Benito Boys and Girls Club is not and shall not be responsible for or liable for any illness, or injury to person or damage to property resulting from the program in which the undersigned is enrolling or being enrolled or from his/her participating in said program, and the participant and the undersigned, if the participant is a minor or under other legal disability, hereby forever releases and holds harmless the said San Benito Boys and Girls Club, its employees, agents and representatives from any and all claims of any kind that the participant, or the undersigned or their respective heirs, executors, administrators, or assigns may have or claim to have resulting from participation in said program. Also, the undersigned and the participant authorize the San Benito Boys and Girls Club to use at its discretion any photograph (s) (black/white or color) taken of the participant in the program and waive any and all claims that the participant or undersigned or their heirs, executors, administrators, or assigns may have or claim to have resulting from such photograph(s) or reproductions thereof. No refunds once shirt orders are placed.

I have read and understand the waiver statement: registration invalid without signature of adult.

Signature of Parent/Guardian

Date

Child Name _____

DOB/Age _____

Parent's Name _____

School/Grade _____

Address _____

Phone _____

Doctor Name/Address/Phone # _____

Emergency Contact & Phone # _____

Insurance Provider: _____ List Medical Problems: _____

T-Shirt Size (circle one) YS YM YL AS AM AL