

BASKETBALL REGISTRATION

WHERE: Havre de Grace Activity Center, 351 Lewis Lane, (next to the Middle School)

WHEN: Monday, September 18th – 6:00-8:00pm - **Returning players only**
Wednesday, September 27th and Thursday, October 12th – 6:00-8:00pm - **Open to all**

Age determination date for all is 12/31/17

COST: \$40.00 per child (co-ed clinic ages 5-6), \$80.00 (ages 7-14) first child in family, \$65.00 (each additional child ages 7-14) in same family (brother or sister), or \$175.00 (maximum family rate for siblings). Cash, check, or money orders accepted (no credit cards). **No discounts.** Payment plans available.

PAYMENT: **MAKE CHECKS PAYABLE TO: Havre de Grace Recreation Committee**
Registration fees are **non-refundable** unless HdG Rec. Committee cancels the program.
Returned checks: a fee of \$10 will be added to the registration fees and both must be paid in cash to complete the registration/enrollment.

UNIFORMS: Players are required to attend registration to be sized for uniforms. A separate check in the amount of \$50 for ages 7-8 and \$90 for ages 9 and must be presented during uniform distribution. The uniform distribution date will be determined later in the season. Uniform checks will not be deposited unless the uniform is not returned at the end of the season. **No uniform will be distributed without a check.**

SPACE IS LIMITED. SIGN UP EARLY.

- Practices are on weeknights (days/times to be assigned) beginning November.
- Games are on Saturdays January to mid-March.
- Teams play in the Aberdeen League to include: Aberdeen, Edgewood, and APG and travel to sites within the league.
- 5 – 6 Clinic does not travel, practices at Meadowvale Elementary School, and no Saturday events.

Concussion & Cardiac Arrest Notice:

- I have read the Concussion Recognition and Prevention information and can review it at www.hdgrec.org or by calling (800) 232-4636 to obtain a copy.
- Sudden cardiac arrest in youth is the leading cause of death in young athletes. Learn the warning signs and symptoms by visiting www.ParentHeartWatch.org or (800) 717-5828 or www.hdgrec.org.

REGISTRATIONS WILL NOT BE ACCEPTED AFTER OCTOBER 12, 2017
For more information contact: **Brett Coleman @ 443-421-3354**

Child's Name: _____ Age _____ Date of Birth _____ Male Female

Parent's Name: _____

Address: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell: _____

E-Mail: _____

I wish to volunteer time to help with: Head coach (Age Group _____) Assistant coach (Age Group _____)
Volunteers must complete a volunteer form and a background check (information on volunteer form)

Uniform size to be **completed during registration**: Note 5/6 receive t-shirts and 7/8 and 9 and up have different uniforms

Shirt: Youth S Youth M Youth L Adult S Adult M Adult L Adult XL Adult XXL

Shorts: Youth S Youth M Youth L Adult S Adult M Adult L Adult XL Adult XXL

Special considerations and/or medical conditions coaches should be made aware of?

Consent Agreement:

By my signature below, I hereby permit my child/ward named above to participate in the Havre de Grace Basketball Program. I will not hold the officers of Havre de Grace Recreation Committee; Havre de Grace Basketball, nor the coaches responsible for any injuries sustained by my child/ward while participating in the program, including transportation to and/or from scheduled practices and games. I also understand that Havre de Grace Basketball does not offer medical insurance and that I am liable for the costs of any medical services required as the result of any injury sustained by my child/ward during participation in this program. I also certify by my signature that my child/ward is physically fit to participate in this program. My family agrees to abide by the Havre de Grace Recreation Committee Code of Conduct. We also have been informed that food and drink are not permitted inside the gymnasiums during practice and/or games and agree to abide by this rule.

Signature of parent or guardian _____ **Date:** ____/____/____

Printed name of parent or guardian _____ **Relationship** _____

The sale or use of tobacco in any form is prohibited in schools or on school grounds and at the Havre de Grace Activity Center. Failure to comply with this request will subject the individual and/or group to revocation of their permit to use said facility. The Department of Parks and Recreation encourages the participation of individuals with disabilities. If accommodations are needed, contact the HdG Office at 410-939-6724 or TTY at "711." Please give at least two weeks' notice. This document is available in an alternative format upon request.

Amount Paid: _____ **Cash:** _____ **Check #** _____