

# KINGDOM

## sports center

### Summer League, 2024

REGISTER IN THE GRADE YOU **JUST GRADUATED FROM**

- 2-HS - BOYS + GIRLS DIVISIONS - No Coed Divisions
- Team + Individual Registrations
- **Deadline: Individuals June 9<sup>th</sup>, 2024 (Parent Volunteer Coaching)**
- **Deadline: Team June 10<sup>th</sup>, 2024**
- League Runs: June 17<sup>th</sup>-July 25<sup>th</sup>, 2024
- **INDIVIDUAL Pricing: \$95 Per Individual (+\$10 Late Reg. Fee)**
- **TEAM Pricing: 2-6<sup>th</sup> Grade - \$425 - TEAM Pricing: 7-HS - \$495**
- 11+ Games including 2 Tournaments - (Fri,Sat,Sun Games)
- **HSB – End of Season Tourn. ONLY Included- July 26-28<sup>th</sup>**
- Mid-Season June 28-30<sup>th</sup>
- End of Season Tourn. 26-28<sup>th</sup> (combined w/SW Ohio Bball)
- **All Pricing Includes Ref Fees**
- **NO JULY 3<sup>rd</sup> or 4<sup>th</sup> Games – ALL Teams will play Make Up Games on Sat. July 6th**
- **CIRCLE ONE: BOY GIRL GRADE: 2 3 4 5 6 7 8 9-HS**

**Days of Play: All Teams will  
Play 2 Times Per Week**

**(League Games)**

**7/8thG /5B/6B/HSB play on  
Mon. & Wed.**

**3/4thG/5/6thG/HSG/3B/4B/7B/8B  
play on Tues. & Thurs.**

Player's Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Parent's Name: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Shirt size (check one): YS: \_\_\_ YM: \_\_\_ YL: \_\_\_ AS: \_\_\_ AM: \_\_\_ AL: \_\_\_ AX:L \_\_\_ AXXL: \_\_\_

**Can parent/family member coach? ( )Yes ( )No - Can parent/family member assistant coach? ( )Yes ( )No**

\*\*\*\*\*PARENT VOLUNTEER COACH SON/DAUGHTER LEAGUE FEE WILL BE WAIVED: COACHES WILL BE CHOSEN BY SPORTS DIRECTOR FOR MOST QUALIFIED\*\*\*\*\*

WAIVER/EXCLUSION CLAUSE (please read carefully and sign below)

I, the parent/guardian/Coach/participant, in registering at Kingdom Sports Center, Inc., understand that he/she/it in attending the basketball program and using the facilities does so at his/her/my own risk. Kingdom Sports Center, Inc., Warren County, OH, and its/their owners, employees and agents, shall not be liable for any damages whatsoever arising from any personal injury or property loss sustained by participant and his/her/my family in or about any programs on the premises. I acknowledge that I am aware of the risks inherent in participating in lacrosse (both practice and competition); that lacrosse is a physical sport which can require considerable running, starting, stopping and physical exertion; and could potentially lead to limb injuries; possible permanent disability and death. Participants and parents assume full responsibility for all injuries and damages which may occur in or about any programs on the premises and he/she/it do or does hereby fully and forever release, discharge and hold harmless Kingdom Sports Center, Inc., Warren County, OH, all associated facilities and its/their owners, employees and agents from any and all claims, demands, damages, rights of action, present or future resulting from or arising out of any person's participation in any programs or use of its facilities. In addition, he/she/it agree(s) to the following rules of play and conduct set by Kingdom Sports Center, Inc. He/she/it understand(s) that failure to do so may result in suspension from participation. Also, I waive all rights to any photos or live video taken during practice or competitions for use in any Kingdom Sports Center, Inc. publication. **Parent/Guardian/Coach Signature:**

**For Office Use Only:** Amount Pd. \$ \_\_\_\_\_ Amount Owed. \$ \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_

VISA or MC \_\_\_\_\_ Exp. \_\_\_\_\_ Code # \_\_\_\_\_ Zip \_\_\_\_\_ Employee Initials \_\_\_\_\_ Date \_\_\_\_\_