

# KINGDOM

## Sports Center

### Summer Basketball League, 2026

# Individual Registration Form

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

- **Deadline: JUNE 7<sup>th</sup>, 2026 Sunday**
- League Runs: June 15<sup>th</sup>-July 30<sup>th</sup>, 2026
- Individual Fee: \$95 (Includes T-shirt)
- 14+ Week Day Games including 3 Tournaments - (Fri, Sat, Sun Tournament Games)
- **HSB – End of Season Tourn. ONLY Included- July 31<sup>st</sup> – Aug. 2<sup>nd</sup> (Fri-Sun)**
- **Pre-Season: June 12<sup>th</sup>-14<sup>th</sup> (Fri-Sun)**
- **Mid Season: July 10<sup>th</sup>-12<sup>th</sup> (Fri-Sun)**
- **End of Season Tournament: July 31<sup>st</sup> – Aug. 2<sup>nd</sup> (Fri-Sun)**
- **All Pricing Includes Ref Fees**
- PRACTICES Included – once per week – Day TBD
- 1 League Game Per Week – Day TBD
- PARENT VOLUNTEER Coaching

CIRCLE ONE: BOY GIRL GRADE: 2 3 4 5 6 7 8 9-HS

PLAYER'S Name: \_\_\_\_\_ PARENT Name: \_\_\_\_\_

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

Can Parent VOLUNTEER to Coach? YES NO

COACHES WILL BE CHOSEN BY DDL 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/I 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/I 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/I agree(s) to the following rules of play and conduct set by Kingdom Sports Center, Inc. He/she/I 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 \_\_\_\_\_