



Kingdom Individual Basketball Academy Winter **REC** League

WWW.KINGDOMSPORTSCENTER.COM
937.746.3370
440 Watkins Glen Dr.
Franklin, OH 45005

THIS KINGDOM LEAGUE IS A 'REC' LEAGUE FOR **REC INDIVIDUALS ONLY**

- 3rd-6TH Possible COED -Jr. High - BOYS + GIRLS DIVISIONS - No Coed Divisions FOR JR. HIGH
- Individual Registrations – 30 MIN. PRACTICES INCLUDED
- Deadline: Individuals Nov. 30th, 2025 (Includes Jersey - Kingdom House Team - Parent Volunteer Coaching)
- League Runs: Dec. 6-Feb 28th, 2026
- INDIVIDUAL Pricing: \$50 Per Individual (+\$10 Late Reg. Fee)
- 13 Games included
- SATURDAY League – 5pm -8pm
- All Pricing Includes Ref Fees
- All games held at The Kingdom Sports Center

CIRCLE ONE: BOY GIRL

GRADE: 3 4 5 6 7 8

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 _____