



Kingdom Sports Center
440 Watkins Glen Dr.
Franklin, Oh 45005
937-746-3370

TEAM REGISTRATION FORM FALL BASKETBALL Sunday League



Fall Basketball League TEAM Information:

- Registration Deadline: Sunday Sept. 3rd, 2017
- Start Date: Sept. 10th - Oct.29nd. (Ends Oct. 22 for HSG)
- 8 WEEKS - **SUNDAY GAMES ONLY** (DH for HSG one week)
- Cost: \$395 Per Team (Due @ Registration)
- Register in Grade enrolled in for Fall 2017 School Year
- NOTE: KSC follows OHSAA Rules-Only 2 on team from same school for 7th-HS boys and girls

SELECT THE FOLLOWING:

BOYS ()

GIRLS ()

CIRCLE THE CURRENT GRADE

3rd 4th 5th 6th 7th 8th 9th – HS

ALL Teams Must Turn a KSC Roster in by 2nd game

KSC has the right to Forfeit Games if this is not done

Must be a KSC Roster - Rosters are located on the website

GAMES: 8 Games: Games on Sundays (Possible 8am-9pm)

- 12 players max per team
- KSC has the right to combine divisions where needed to fill brackets.

ROSTER: Please include roster with all players parent's signatures. No team will be allowed to play without a completed roster. Rosters can be found in our office or on our website www.kingdomsportscenter.com on our rosters & rules link. Must be turned in by first game.

SCHEDULES: Will be posted on Website at www.kingdomsportscenter.com on league schedules link 3- 4 days before league starts and is player and coach's responsibility to check game days and times. Times and days subject to change.. Full Schedule will be posted around the 4th week for competitiveness-if needed per Sports Dir.

- Registration fee due at time of registration.
- Make up days are not guaranteed.
- KSC will not accept individual checks from parents for payment, Credit Card, Check, or Online Payment for team fee is to be paid by coach. You may register online at www.kingdomsportscenter.com or call us at 937-746-3370 or fax your completed form to 937-746-7227 or send check or money order to: 440 Watkins Glen Dr Franklin, Ohio 45005
- Registrations after deadline as well as rescheduled games are subject to additional fee approved by Director only
- Refund will NOT be given if team cancels after schedule is posted-No Exceptions
Register online at: kingdomsportscenter.com

Kingdom Sports Center Basketball League Entry Form: (Please use one form per team per session)
REGISTER ONLINE AT WWW.KINGDOMSPORTSCENTER.COM

Team Name: _____ Coach's Name: _____ Uniform Color: _____

Email Address: _____ Cell Phone: _____

Coach – Please Read Request section below after signing waiver

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: _____ Date Signed: _____

Player/Team will NOT be able to participate if the Waiver & roster is not signed and dated. Roster must be turned in at first game.

Requests: Must be written on form below by coach at time of registration. Requests may or may not be met. Any requests after registration deadline will be charged an inconvenience fee of \$25 due upon receipt - if request can be met. Requests: _____

For Office Use Only: Amount Pd. \$ _____ Amount Owed. \$ _____ Cash _____ Check # _____
VISA or MC _____ Exp. _____ Code # _____ Zip _____ Employee Initials _____ Date _____