

INDIVIDUAL BASKETBALL REGISTRATION WINTER 2016-17

937-746-3370



INDIVIDUAL REGISTRATION FORM 2016-17 WINTER

Gender of child: Boy () Girl ()

() True Rec: 2nd – 6th Grade \$75 per individual

- Games on Sunday afternoons (will not conflict with church)
- Deadline is Sunday Nov. 28th
- Starts Sunday Dec. 4th

Choose Grade
() 2 nd () 3 rd () 4 th () 5 th () 6 th

() 7th Grade - HS Division - \$95 per individual

14 + Games
 High School Sun. (AM&PM Games) & (Tues. or Thurs Bonus Game night)
 7th & 8th Sat. (Evenings only) & (Tues. or Thurs Bonus Game Night)
 High School starts: Dec 4th
 Jr.High Starts: Dec. 3rd

Choose Grade
() 7 th () 8 th () 9 th - HS

DEADLINE Mon. Nov. 28th

All individual registrations include team t-shirt

Register online at:
www.kingdomsportscenter.com

Fee is waived if parent volunteer coaches & picked by Sports Dir.

GAMES:

- 10+ Games True Rec
- 14+ Games –Jr.High-HS
- 10 players max per team
- KSC has the right to combine divisions where needed to fill brackets.

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.

- Registration fee due at time of registration.
- Make up days are not guaranteed. Canceled games may or may not be rescheduled
- KSC will accept individual Credit Card, Check, cash, or Online Payment for individual fee. You may register online at www.kingdomsportscenter.com or call us at 937-746-3370 or fax your completed form to 440 Watkins Glen Driver Franklin, Ohio 45005
- Registrations after deadline as well as rescheduled games are subject to additional fee
- Refund will NOT be given if individual cancels after t-shirt is ordered
- Holidays may reflect days of play.
- Last 2 weeks of schedule may change due to competition level once scores have been input.

All games will be held at:
 Kingdom Sports Center 440 Watkins Glen Dr.
 Franklin, Oh 45005 **937-746-3370**

Kingdom Sports Center Basketball League Entry Form:
 REGISTER ONLINE AT WWW.KINGDOMSPORTSCENTER.COM

Player's Name: _____ Date of birth: _____ Parent's Name: _____

Email Address: _____ Cell Phone: _____

School attended last year (include district): _____

Current School enrolled in (include district): _____

Shirt size: () S () M () L () XL Select one: () Child Size or () Adult Size

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

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/ll 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/ll 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/ll agree(s) to the following rules of play and conduct set by Kingdom Sports Center, Inc. He/she/ll 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 Wavier is not signed and dated.

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

VISA or MC _____ Exp. _____ Code # _____ Zip _____ Employee Initials _____ Date _____