



Geneva Rec. Youth Basketball 2018

Are you interested in coaching Yes/ No _____ Team Name/ Color: _____	Amount Paid \$ _____ Cash/Check: # _____ Players Name: _____ Receipt Number: _____
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Exciting changes are coming to the Geneva Rec 3rd-6th basketball league. We will be having boys and girls teams (depending on the numbers). Locations TBD. Signups will be **October 1,2,3,4** all from 5-7pm at the Geneva Recreation Center. There will be a \$10 late fee for any registration beyond October 4th. Season will start late October with games starting November 12th. Coaches will contact players of the first practice.

Mail in Registration:
October 1st -October 5th

For More Information:
Brandon Hanna 440-466-9139
City of Geneva 440-466-4675
genevarec@genevaohio.com

Cost Per Player: \$60.00

Mail to: City of Geneva
44 North Forest Street
Geneva, Ohio 44041

Player Information			
Name: (First/Last) _____	Age: _____	B/G _____	School: _____ Grade: _____
Address: _____	Zip Code: _____	Phone: _____	Alt: _____
Are you a City of Geneva Resident: Y/N If No, then where? _____			
Email Address: _____	Shirt Size: Youth 6/8 10/12 14/16		Adult S M L XL
Parents Names: _____			
Photo Release/Consent: I _____ give permission for the City of Geneva to use photos of myself or child in advertisements, fliers, web-site pages, Social Media, newspaper and other publicly displayed areas for promotional purposes. My child's name shall not be used in conjunction with his/her picture unless other permission is given.			
Signature: _____		Date _____	

Consent for Medical Treatment

As the Parent or Legal Guardian of the above named player, I hereby give consent for Emergency medical care prescribed by a duly Licensed Doctor of Medicine or Doctor of Dentistry **IF I OR GUARDIAN ARE NOT AVAILABLE**. This care may be given under whatever conditions are necessary to preserve the life, limb or well being of the dependent.

Signature and Date

I, the parent/guardian of the registrant, agree that the registrant and I will abide by the rules of the Geneva Youth Basketball program and Sponsors. Recognizing the possibilities of physical injury associated with Basketball I hereby release, discharge and/or otherwise indemnify the Geneva Youth Basketball program and Sponsors, their employees and associates personnel including the owners of the facilities utilized for the program, against my claim by or on Behalf of the registrant as a result of the registrant's participation in the Program and/or being transported to or from the game, which transportation I authorize.

Signature

Date