



Castleton Christian Church Youth Basketball

7214 Hague Road, Indianapolis, IN 46256 Ph.: 849-2650

BOYS AND GIRLS COED

1st & 2nd grade league and 3rd & 4th grade league
Pre-League play begins week of November 27, 2018

NOTE: 40 spots available per age group. We filled up last year so don't wait!

We have a **limited number** of spots available in our 2018-2019 basketball program. To register, fill out the form below and mail it with payment to the address listed above. Forms are also available online at www.CastletonChristian.org. Forms can also be picked up/dropped off at the church which is located North of Crestview Elementary. After registering, mid November, you will receive an email with important dates, including skills clinic and skills assessments dates.



Registration Form—2018 / 2019

Registration Fee \$65 - If paid **on or before Nov. 1, 2018** (multiple players per family—\$60 per player)

Registration Fee \$70 - If paid **after Nov. 1, 2018** (multiple players per family—\$65 per player)

PLAYER	Name: _____ Grade: _____
	Address: _____ City: _____ Zip: _____
	Phone: _____ Player Lives with: <input type="checkbox"/> Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other _____
	Gender: <input type="checkbox"/> Boy <input type="checkbox"/> Girl Birth Date: _____ Age: _____ School Attending: _____
	Seasons Played: _____ Is Player covered by family private health care / Medical Insurance Policy? Yes No

T-Shirt Size: (Circle One) **Youth:** S M L XL **Adult:** S M L XL

PARENTS	Mom: _____ Work/Cell Phone: _____
	Dad: _____ Work/Cell Phone: _____
	Email Addresses: (Please Print) _____
	Church Affiliation: _____

Please Circle a Minimum of 2 Practice Nights AVAILABLE: Monday Tuesday Wednesday Thursday

Special Requests: _____ NOTE: We may NOT be able to honor special requests.

VOLUNTEERS ARE NEEDED!

Please check areas that you would be willing to assist in:

Head Coach: Mom Dad Shirt Size: _____ Assistant Coach: Mom Dad Shirt Size: _____

PLEASE READ THIS FORM CAREFULLY. Complete the registration form and sign the waiver below. Fee includes team shirt, trophy and gym usage fee.

WAIVER: I, parent or guardian of the above registrant, hereby give my consent and approval for my child's participation in any and all activities associated with the Castleton Christian Church Youth Basketball League. Hereinafter called CCCYBL. I assume all risks and hazards incidental to my child's participation in the CCCYBL and hereby release and hold harmless CCCYBL, league organizers, coaches and referees from any liability, claims or damages arising out of my child's participation in the activities of CCCYBL. I understand that it is my responsibility to confirm that my child is in satisfactory physical condition to participate in the activities of CCCYBL. In the event that my child becomes injured or ill during any practice or game at CCCYBL, I authorize the child's coach or his/her representative, to secure first aid and/or the service of any physician or hospital and agree to assume all financial obligation incurred therewith. I understand that CCCYBL does not carry medical insurance for participants.

Date: _____ Signature: _____

DEADLINE FOR DISCOUNTED EARLY REGISTRATION IS Nov. 1, 2018 /

Mail registration with payment to: Castleton Christian Church, Attn: Youth Basketball League, 7214 Hague Rd, Indianapolis, IN 46256 Ph.: 849-2650

DO NOT WRITE IN THIS AREA—FOR CCC USE ONLY:

AGE GROUP: _____ CASH: _____ CHECK NO.: _____ AMOUNT: \$ _____ INITIALS: _____