



STORM YOUTH SPORTS 5TH & 6TH BOYS BASKETBALL

**REGISTRATION & FEE DUE back to school:
Monday, October 30th**

Please complete the following information if you'd like to register your child to participate so that we will be able to contact you for all basketball news. Contact us at stormyouthsports@gmail.com with any questions!

Name of Player(s): _____

Parents' Names: _____

Home Address: _____

Best Contact Phone number(s). Please check the box next to the number if it can

receive texts: _____ ☐ OR _____ ☐

Email: _____

Are you willing to help coach the team? _____yes _____no

Registration Fee: \$40.00 Payable to- Storm Youth Sports

Check _____

Cash _____

Waiver of Liability:

I the undersigned, as legal guardian of a participant in the Storm Youth Sports program, hereby acknowledge the existence of and assume full responsibility for certain risks associated with this program which may cause damage to property or personal bodily injury or death to the participant and, furthermore, herewith agree to indemnify and hold forever harmless the Storm Youth Sports Program.

I also understand that I am responsible for replacement costs of any Storm Youth Sports equipment that is damaged beyond the expected wear of utilizing it in games and practices. I will clean and launder all equipment and uniforms before returning it to Storm Youth Sports at the end of the season.

The Storm Youth Sports Program has permission to use any photograph or video of my child in its promotional material. I have read the entry information provided and certify my compliance by my signature below.

Parent's Signature: _____ **Date:** _____

