

2011-2012 - EWPAL REC Basketball REGISTRATION FORM

East Windsor PAL, 30 Airport Road, East Windsor, NJ 08520 (609) 448-5333 Fax: 448-3975

<https://sites.google.com/site/ewpalbasketball>

REGISTRATION INFORMATION: You may register at the PAL office during the week, Mon – Fri, 9 AM - 3:30 PM or on the following Saturdays: Oct 22 & Nov 5, 9:00 AM - 12:00 PM. You can also leave your form in the black box on the porch any time. Also available is online registration at eastwindsorpal.org for a small credit card processing fee. Registration deadline is Nov. 7 (Guaranteed a spot on a team). A \$20 LATE FEE WILL BE CHARGED AFTER THE DEADLINE (And you may be placed on a waiting list.) Please note players born after 12/2007 are two young to participate in this league.

GENERAL INFORMATION:

E-mail address: _____

**Note: e-mail will be the primary communication unless otherwise noted.*

Home Phone: _____ Cell Phone: _____

Child's Name: _____ Sex (Circle one): Male Female

Date of Birth: _____ Age: _____ Grade: _____

Address: _____ City: _____

Parent / Guardian: Mother: _____ Father: _____

Shirt Size: (Circle One) YS YM YL AS

Does applicant have any medical condition that would preclude or restrict participation in this program? Yes () No () If yes, explain: _____

Are you interested in coaching? Yes [] No [] Name _____

If yes, (Circle One) Head Coach or Assistant Coach

Division	Grades	Fee
Beginner	Pre-K and Kindergarten	\$105
Instructional Beginner	1-2	\$105
Instructional Advanced	3-4	\$105

SKILL RATING: (circle one) 1 2 3 (See below for the description of the skill ratings)

- If they are new to the game, still learning to dribble, or have trouble shooting a basketball, give them a skill rating of 1.
- If they can dribble the basketball from one end of the court and back, reach the basket when shooting the ball, and know some basic game rules, they should receive a 2.
- If they can do all of the above plus make offensive basketball moves while dribbling, give them a skill rating of 3.

PARENT OR GUARDIAN AUTHORIZATION:

Father's Name _____ **Mother's Name** _____

I attest that all information provided above is, to the best of my knowledge, true and accurate. I agree to abide by all rules & regulations of the PAL. I pledge to act in a sporting manner at all times and to support my player, coach, team and game officials. I understand that my child and I may be suspended from EWPAL activities if I act in a violent, profane, or unruly manner during practices or games. In the event of an emergency, accident, or injury which occurs while this person is participating in a PAL program, or traveling to or from such a program, and I am not present, I hereby give permission for the adult representative of the PAL to secure whatever medical and hospital care necessary, and I agree to be financially responsible for such care and treatment. I hereby further agree to hold the PAL, and its representatives, organizers, & sponsors free from all personal liability in connection with any such emergency, accident or injury.

SIGNED: _____ **DATE:** _____

Total due: _____ Amount Rec'd: _____ Ck#: _____

Recreational Basketball Family Discount: \$30 off each additional child. NO Refunds issued after the start of the season.