



# Town of Hampden 2018-2019 Basketball Sign-Ups

The Parks and Recreation Department is accepting registrations for the 2018-2019 Basketball Season in the Parks and Recreation office, at the Town Hall, 625 Main Street, Hampden, MA, 01036.

## Registration deadline is Wednesday, October 17th!!!

The Parks and Recreation Department administers separate basketball programs for boys and girls of Hampden for grades K-8.

<b>Kindergarten</b>	In-Town/Instructional/Skills/Everyone gets a t-shirt	Registration fee is \$60
<b>Grades 1-2</b>	In-Town/Skill Development/Learn positions/Start games	Registration fee is \$60
<b>Grades 3-4</b>	CYO League	Registration fee is \$125
<b>Grades 5-8</b>	CYO League	Registration fee is \$125

**Registration fees are non-refundable once a player has been assigned to a team.**

PLEASE NOTE: If you or any member of your family owes any past due balances, equipment or **UNIFORMS** to Parks and Recreation, you will not be eligible to participate in this or any P&R program until full payment or restitution is made.

### CYO Evaluation Dates

#### Tuesday, October 23th

5-6:30pm Girls Grade 3-4

6:30-8pm Boys Grade 3-4

8-9:30pm Boys Grade 7-8

#### Wednesday, October 24th

5-6:30pm Girls Grade 5-6

6:30-8pm Boys Grade 5-6

8-9:30pm Girls Grade 7-8

**All evaluations will be held at Thornton Burgess Middle School Gym. Players must attend.**

**Please note that there are a limited number of spaces on team rosters. Late registrations will be accepted only if openings are available on the teams. All registration fees must be paid in full at time of signups.**

**Make checks payable to: Town of Hampden Parks & Recreation.**

Player's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Grade: [as of Sept. 2018] \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Parent(s) Name(s) \_\_\_\_\_

Shirt size: \_\_\_\_\_

## **Release from Liability and Indemnification**

I agree to waive and release the Town of Hampden, the Parks and Recreation Department and their employees and agents, whether paid or voluntary, the Recreation Association of Hampden ("RAH"), and their members from and against any and all claims, cost liabilities, expenses, or judgments, including attorney's fees and court cost arising of my or my child's participation in the Town's recreation program or any illness/injury resulting there from, and hereby agree to indemnify and hold harmless the Town of Hampden or their agents from and against any and all such claims, whether caused by negligence or otherwise, except for illness and injury resulting directly from gross negligence or willful misconduct on the part of the Town or its employees. I understand and agree that by signing this waiver I am freeing the Town of Hampden, its employees, officers, or agents from any liability resulting from my (or my child's) participation in this sponsored event or activity. I recognize that the event can be dangerous to me (or my child) and accept these dangers. I understand that if I am (or my child is) injured, this waiver will be used against me and anyone else claiming damage because of my (or my child's) injury in any legal action. I also understand that no employee or agent is authorized to modify this waiver.

I hereby represent that: I understand and am familiar with the nature of the activities in which I (or my child) will participate in this recreational program, that I (or my child) am in good physical health, and that I (or my child) do not have physical or emotional conditions, past or present, of which I am aware, which would in any way affect my (or my child's) ability to participate in this activity. **I have personally read and understand this waiver.**

In case of emergency, I give my permission for emergency medical treatment.

This form shall be considered valid until cancelled or changed in writing by the undersigned parent/guardian/participant and received by the Town of Hampden Parks and Recreation board. My signature acknowledges that I understand and agree to the above conditions.

Signature of Parent/Guardian: \_\_\_\_\_ Relationship to participant: \_\_\_\_\_

Full Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

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## **VOLUNTEERS / COACHES**

We always need volunteers to coach. If you're interested in helping, please indicate below:

I am interested in volunteering for the following:

☐ COACHING:

- |   |                  |
|---|------------------|
| <input type="checkbox"/> Head Coach Only                | Age group: _____ |
| <input type="checkbox"/> Assistant Coach Only           | Age group: _____ |
| <input type="checkbox"/> Either Head or Assistant Coach | Age group: _____ |

I understand that in order to Coach I must be CORI certified. First Aid & CPR certification may be required.

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

## **Sports Uniform Agreement**

I, \_\_\_\_\_, agree to be responsible for the uniform assigned to me and return it to my coach. Uniforms must be returned clean and in good condition, assuming normal wear and tear.

**Note:** If you or any member of your family owes any past due balances, equipment or uniforms to Parks and Recreation, you will not be eligible to participate in this or any P&R program until full payment or restitution is made.

Signature of Player: \_\_\_\_\_ Signature of Parent/Guardian: \_\_\_\_\_