Basketball Registration Form - Winter 2017-18 Boys and Girls - Grades K - 8

	7677
Player/Child's Name	
D.O.B Gender: Male or Female Current Grade:	
Address:	252
CityZip code	SP
Parent/Guardian Name	
PhoneCell	VOLUNTEE By submitting
Email	(as parent or l your child are
Address if different than child's	Sports (HIS)
School your child is currently attending:	success of the involvement.
Is this your child's first time playing a team sport? YesNo If no, list previous coach/team	<u>Please choose</u> Select multip
Does your child have any health restrictions, health problems or physical limitations we should be aware of? Yes No If yes, please list:	o Coach o Assistant Co o Team Paren o Referee
In case of emergency you hereby give permission for us to contact the following person if you can't be reached:	o General Vol
Name	PLAYER'S S o Youth S (6-
Relationship to the child:Phone	o Youth M (1) o Youth L (14
Indicate your preferred medical provider (if any):	EQUIPMEN
Hospital	required to h
Physician's name Phone	REG
Dentist's name Phone	Registration f
Parent Signature	with a maxim \$100 per fam
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GENERAL INFORMATION:

Hershey Intramural Sports is a program of Lancaster Mennonite School. Anyone in agreement with the rules and guidelines may participate. You do not have to attend Lancaster Mennonite School to participate.

Registration is available for Boys and Girls in grades K through 8.

The season "**kickoff**" is Saturday, December 2 at Lancaster Mennonite Hershey Campus. The program will end on January 27, 2018 and will not be held on December 23, .

Practices and games will be held every Saturday from 1:30-3 p.m.

All adult volunteers will need to submit the background clearance paperwork required by Pennsylvania law.



VOLUNTEER POSITIONS

By submitting this Registration Form, both you (as parent or legal guardian of your child) and your child are joining the Hershey Intramural Sports (HIS) program. **The success of the organization relies on your**

Please choose at least one of the following:

Select multiple, if possible:

o Assistant Coach o Team Parent Helper (snacks, etc.)

o General Volunteer (where needed most)

PLAYER'S SHIRT SIZE (check one):

o Youth S (6-8) o Adult S o Youth M (10-12) o Adult M o Youth L (14-16) o Adult L

EQUIPMENT NEEDED: Each player is required to have athletic shoes and shorts.

REGISTRATION AND FEES

Registration fee is \$50 for each player. Additional players in your family are \$25 each with a maximum fee for all registrations of \$100 per family.

Refund Policy - Your signature and receipt of payment constitute you and your child's commitment for your child to play in the Hershey Intramural Sports program. No refunds will be issued.

MAILING ADDRESS: Mail or deliver your signed registration form with cash or check made payable to: LM Hershey Intramural Sports, 1525 Sand Hill Road, Hummelstown, PA 17036.

Feel free to contact his@lancastermennonite.org or clingergg@lancastermennonite.org with any questions.

LM Hershey Campus: 717-533-4900

RELEASE AND INDEMNIFICATION OF HIS

By my signature below I affirm that I am parent or legal guardian of the above-mentioned child. I agree that I and my child will abide by the rules of the Hershey Intramural Sports program (HIS) and its affiliated organizations and sponsors as determined and enforced by HIS in its sole discretion. I understand that sports activities such as those conducted by HIS are inherently risky and pose the specific risks of serious bodily injury for participants and spectators. Both for myself and on behalf of my child, I hereby assume the risk of activities that I or my child engage in with HIS. I hereby release, discharge and/or otherwise indemnify HIS and affiliated sponsors and organizations, their employees, volunteers and associated personnel, including the owners of fields and facilities utilized for the program, from and against any claim, loss or damages by or on behalf of me or my child arising from the negligence of any HIS personnel or from me or my child's participation in HIS sports activities. I agree that to the extent I or my child's other parent(s) or legal guardian(s) is liable for any claim involving HIS, that I shall be held jointly and severally liable, together with my child's other parent(s), for any liability arising from my child's participation in HIS sports activities.

Signatures of both parents/guardians are needed to complete this registration plus players signature at bottom.

Parent/Guardian:	Date
Parent/Guardian:	Date

AFFIRMATION OF HIS POLICIES AND PERSONNEL

I understand that my child's acceptance of the offer to be a member of HIS will require my child to regularly attend practices and games. I also understand that this is a team sport, and I agree to support the HIS coaches and the decisions of the coaches, specifically including, but not limited to, my child's playing time and position as may be further determined from time to time pursuant to the guidelines for the HIS program. I understand that lack of support or cooperation with the HIS program or personnel by me or my child may result in my child's immediate dismissal from further HIS program participation in HIS's sole discretion without refund, appeal or opportunity to correct the situation.

Parent/Guardian:	Date
Parent/Guardian:	Date

PLAYER AGREEMENT (please read the paragraph below with your child and have them sign on the line. ALL players) By my registration, I affirm that I am a student of the above-indicated institution and I am obtaining a position on a Hershey Intramural Sports team to play in organized recreational sports activities. I understand that this position requires me to regularly attend my team's practices and games. I also understand that I will be playing a team sport, and I agree to support HIS, my teammates, my coaches and the decisions of my coaches in all areas related to the HIS program, including but not limited to my position and playing time, according to the guidelines for the HIS program as they may be modified from time to time. I understand that lack of support, cooperation and/or participation by me or my parents for the HIS Program or personnel may result in my immediate dismissal from the HIS program and my assigned team. I agree to uphold the rules of this sport and the HIS Program and to always show good sportsmanship.

Player Signature:

Date