

Little Dribblers Club – 2018-19
Registration Form

Ck#/Amt _____ Rec'd by _____

Cost \$15.00/\$20 if registered after December 14th

(Checks Payable: Milton-Union Boys Basketball Parents Association/\$30 Returned Check Fee)

Player Name _____ Grade _____
Address _____ City/Zip _____
Contact #1 Name _____ Ph# _____ Text: Yes/No
Contact #2 Name _____ Ph# _____ Text: Yes/No
Email _____
Shirt Size: YM/YL/AS/AM/AL

MEDICAL AUTHORIZATION AND PERMISSION TO PARTICIPATE

Release of responsibility:

I, the parent/guardian of the above named child, shall hold harmless Milton-Union Exempted Village Schools, its officers, employees, coaches, and camp staff against liability, claim, action, cost, damage, loss, or injury while participating in the basketball instruction.

Parent Signature Date

I hereby consent to participation in this instruction. In the event of an emergency, I give the staff permission to take all medical emergencies to the closest medical center.

Parent Signature Date