



High School Boys Basketball

Registration Form

Participant's Name: _____

Date of Birth: _____ **Grade:** _____ **Shirt Size:** _____

Parent or Guardian's Name:

Address: _____
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Telephone Number Home: _____

Cell: _____

Email Address: _____

I'd like to help _____ Coach _____ or be an Assistant Coach

Waiver

I, the parent or guardian of the above named player, do hereby give my approval of his participation in this High School Basketball League. Recognizing the possibility of physical

injury associated with this sport and in consideration of the player being accepted in this program, I hereby release, discharge and/or otherwise indemnify Courtside Sports Center, LLC., Debby DeLorenzo and all their affiliates including coaches and/or referees, against any claim by or on behalf of the above mentioned player as a result of the player's participation in the program which includes all games, practices, meetings and official activities, including being transported to and/or from the same.

Parent or Guardian

Signature: _____

Date: _____