JCA YOUTH BASKETBALL LEAGUE

PLAYER REGISTRATION

(Please print)

Please fill out this form completely and mail to:

JCA, Attn: Rick Evans, 60 S. River Street, Wilkes-Barre, PA 18702

Phone: (570) 824-4646

Player Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ T-shirt size\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_ Zip\_\_\_\_\_\_\_\_

Age\_\_\_\_\_\_\_\_\_\_\_ Birthdate\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex\_\_\_\_\_\_ Grade \_\_\_\_\_\_\_\_\_\_\_\_

Player Email address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work phone\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Email address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Would you be interested in volunteering? YES!!! No thanks

Emergency Contact Information

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby unconditionally release JCA of NEPA and any of its officers, directors, executives, employees, agents, volunteers and anyone working under, through or in connection with any of them with respect to any incident, claim, occurrence, loss, injury, or damage whether known or unknown, present or future, foreseeable or not, that could or may arise out of such participation in any and all programs and activities, including provided travel to and from, in which I participate at the JCA of NEPA.

Photo permission: Yes, you may use my child’s/my photo or video in JCA promotional materials, communications, on the JCA website, online or in cooperation with media outlets and other organizations without consent. Children and teens 18 and under must have parent’s permission. Names will not be used. I have read and agree to the above terms and conditions.

Parent/Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please Circle One: Boys 3rd / 4th grade division Girl’s 3rd / 4th grade division

Boys 5th / 6th grade division Girl’s 5th / 6th grade division

Please make check payable to: JCA (Jewish Community Alliance of NEPA)

League fee: $450.00/team + $6.00 per player for game shirt

Individual fee: $65.00 per player + $6.00 for game shirt

Deadline for individual registration forms – forms must be completed and returned to the JCA by October 31, 2017.

Season begins November 12, 2017. Championship game and banquet March 11, 2018.