

Shoreline Breakers Basketball
2019-2020
Registration Form

PLEASE RETURN WITH A \$50 PER PLAYER OR \$150 FOR FAMILIES WITH 3 OR MORE PLAYERS BY OCTOBER 1, 2019. THIS IS NON-REFUNDABLE REGISTRATION FEE.

Returning Player? Yes/No

Player Name:

Birth Date:

Age on September 1, 2019

Parent Name(s):

Address:

Parent's Phone #

Parent's Email:

Player's Email (Optional):

Doctor's Name:

Insurance Co.

Policy #

Are there any medical conditions we should be aware of?

2019-2020 SEASON COMMITMENT

My child, _____, has my permission to participate on the Shoreline Breakers Basketball team. I will not hold their staff or volunteers responsible in case of accident or injury. I authorize the supervising adult to seek any necessary emergency medical treatment if I cannot be reached.

We, as parents, agree to allow our child to play on the Shoreline Breakers Basketball team. We also agree to pay the fees required for our child's participation as outlined in this registration form. Basketball is a team sport and joining a team is a commitment, as such we will ensure that our child is on time for practices and games. In the event our child cannot be present we will honor our child's commitment to the team and coaching staff by notify the coach as soon as possible.

Parent/Guardian Signature Parent/Guardian Signature _____

As a Shoreline Breaker Basketball player I agree to bring my best effort each time I take the court, for practice or a game. I will respect the coach and give my full attention to his/her instruction and my full commitment to work, to learn, and execute all that I am taught. I will respect my teammates and opponents both in victory and defeat. As a member of the Shoreline Breakers I will work to exhibit Christ-like behavior with my words, my attitude, and my dealings with coaches, referees, teammates, and other players. Basketball is a team sport and successfully played with an unselfish attitude and team perspective.

Player's Signature of Commitment _____

All registration forms and payments can be sent to:

**Donna Ball
529 Miller Dr. Unit 305
Grand Haven, MI 49417
Phone number: (616) 795-1970**

PayPal Payments can be sent to: Shorelinebreakerssports@gmail.com