



Westfield United Basketball Recreation Divisions and Travel League

League Use Only

Division _____
 Park & Rec. Dept. _____
 Amount Paid _____
 Check _____
 Cash _____

Participant's Name _____

Address: _____
 First _____ Last _____ City _____ Zip _____ Grade _____

Gender: Female _____ Male _____ D/O/B _____ Age as of Oct. 1, 2016 _____ School Attending _____

Parent/Guardian Name: _____ Home Phone Number: (Phone number given to coaches ages 9 & up) _____

Cell Phone: _____ Email address: _____ Would you like to volunteer? _____ Head Coach

COACHES WE NEED YOUR HELP! (NEED TO COMPLETE CORI/SORI AND CONFLICT OF INTEREST FORMS)

_____ Assistant Coach

Please check the appropriate recreation division:

I would like to coach with _____

- | | |
|---|--|
| _____ Instructional –Mondays Co-Ed 5-6 yrs. \$ 50.00 | _____ Senior Girls 13 yrs.–18 yrs. \$ 90.00 |
| _____ Instructional –Tuesdays Co-Ed 5-6 yrs. \$ 50.00 | _____ Sophomore Boys 9-10 yrs. \$ 70.00 |
| _____ Freshmen–Co-ed 7-8 yrs. \$ 50.00 | _____ Junior Boys 11-12 yrs. \$ 80.00 |
| _____ Sophomore Girls 9-10 yrs. \$ 70.00 | _____ Senior Boys 13-14 yrs. \$ 90.00 |
| _____ Junior Girls 11-12 yrs. \$ 80.00 | _____ High School 15 yrs.– 18 yrs. \$ 100.00 |

**In House Basketball Payable:
 Parks and Recreation Dept.
 (Instructional Ages 5 to
 High School Age18)**

Ages 5-7 and Suburban do not
 need to complete Boys & Girls
 Club form. Only Ages 9 & Up

- | | |
|---------------------------------|--------------------------------|
| _____ Girls 5-6 Grade \$ 150.00 | _____ Boys 5-6 Grade \$ 150.00 |
| _____ Girls 7-8 Grade \$ 150.00 | _____ Boys 7-8 Grade \$ 150.00 |

If your child does not make the cut in the Suburban
 Travel League do you want to play in the In House
 Recreation League? Yes _____

Make Check Payable: Westfield Parks and Recreation Foundation, Inc. (*Travel Suburban League)

Participation in this activity may involve risk of injury. To my knowledge I (or my ward) have no health impairment which may interfere with or preclude any participation in the above described activity. As a parent or guardian or participant. I am aware of the hazards and my (or my ward's) ability to participate. I hereby agree to release, discharge and hold harmless the City of Westfield, Westfield Youth Basketball, Inc., its employees, contracted instructors and volunteers from any liabilities which may occur from participating in the activity. I understand that participation in any recreational or sport activity involves risk. I further understand that the City of Westfield and Westfield Youth Basketball, Inc. does not provide accident/medical insurance for program participants. In addition, I give permission for the children(ren) to be treated by qualified medical personnel in the event that the above name parent/guardian can not be reached at the phone numbers provided.

ALL ADULT PARTICIPANTS MUST SIGN BELOW. IN ADDITION THE SIGNATURE OF A PARENT/GUARDIAN IS REQUIRED FOR REGISTRANTS UNDER THE AGE OF 18

Signature (Parent/Guardian if participant is under the age of 18) _____ Date: _____

Mail or drop off to: Westfield Parks and Recreation Department
 4 Holcomb Street
 Westfield, MA 01085
 Telephone: (413) 572-6263 Web: www.cityofwestfield.org