



YOUTH BASKETBALL REGISTRATION FORM

FAQ

OFFICE USE ONLY: Date Paid: ______\$___

HOW TO COMPLETE THE FORM: Please complete one form per child. If you have any special needs or requests, please make note of them, but also know that nothing is guaranteed. **Return completed form to City Hall, or email to Jennifer at JReynolds@ci.woodlake.ca.us**

WHAT'S THE COST: \$50 each if signed up before December 6th | \$65 each until registration ends on December 13th

WHAT IS PROVIDED: Each registered child will be provided with a jersey and shorts. Players will need their own athletic shoes.

WHEN ARE GAMES: The season starts mid-January (once school is back in session) & will wrap up by the end of March. Games will be played on week nights, and on Saturdays. Scheduling will all depend on registration and will be communicated as soon as possible.

WHAT ARE THE AGE DIVISIONS: 6 and under (6U), 8U, 10U & 13U—approximately. (based on registrations & may change) The youngest division will likely be coed. All other divisions will be split boys/girls. 13U Division teams are drafted by Coaches.

WHEN WILL I BE CONTACTED NEXT: Once registration is closed, teams will be formed & coaches will be assigned. You will hear from your team's coach regarding a practice schedule & game schedule information approximately the 2nd week of Jan. Check social media for updates.

PLAYER'S NAME:		AGE AS-OF JAN 1st, 2025:			
CITY: Woodlake Elderwood Lemo *If other, list your City here:	on Cove Three Rivers	Badger Ivanl	noe Seville	Exeter	Visalia
DOB: GENDER:	CI	URRENT <u>GRADE</u> IN	SCHOOL:		
PLAYER'S UNIFORM SIZE: Youth X-	Small Youth Small Adult Sma		-	Youth Larg	_
PLAYER'S EXPERIENCE LEVEL: First-ti *Select all that apply	me playing Under 5	Years Experience	Played 5+ Years		
PARENT/GUARDIAN 1:		CELL #:			team group to
PARENT/GUARDIAN 2:		CELL #:			П
EMAIL ADDRESS:			I opt-in for ema	nil updates:	
ADDITIONAL EMERGENCY CONTACT :		PHO	NF #:		_
SPECIAL REQUESTS Please list any requests that you have, with the unc guaranteed. Players in the oldest age group are en geographical area are placed together on the same from the same geographical area, please email JRev	tered into a draft & we do not team when-possible for carpo	honor requests as a rul poling purposes. If you	e. Also note that, a	s a rule, players	from the san
Same team as this (these) other player(s):	, –				
, , , , , , , , , , , , , , , , , , , ,					
 Requesting this Coach: 					
Requesting this Coach:Other Request/Notes:					
Other Request/Notes:					
Other Request/Notes: **TEAM SUPPORT** The City of Woodlake Parks & Rec programs rely or	volunteer coaches for the ope	eration & success of ou		select what leve	l of
Other Request/Notes: **TEAM SUPPORT** The City of Woodlake Parks & Rec programs rely or	volunteer coaches for the ope order to make your child's sea	eration & success of our	programs. Please :		
Other Request/Notes: **TEAM SUPPORT** The City of Woodlake Parks & Rec programs rely or volunteerism/support you are able to commit to in	o volunteer coaches for the ope order to make your child's sea eam communication between (eration & success of our ason a success: City & Parents, sets prac	programs. Please s	ons, facilitates ga	me play)
Other Request/Notes: **TEAM SUPPORT** The City of Woodlake Parks & Rec programs rely or volunteerism/support you are able to commit to in Head Coach (Main point-person for te	o volunteer coaches for the ope order to make your child's sea eam communication between o needed at practices & fill-in o	eration & success of our ason a success: City & Parents, sets prac n games when Head Co	programs. Please stice dates & location ach can't make it, co	ons, facilitates ga oordinate snack	me play)
Other Request/Notes: **TEAM SUPPORT** The City of Woodlake Parks & Rec programs rely or volunteerism/support you are able to commit to in Head Coach (Main point-person for te Support Coach (Assist head-coach as	o volunteer coaches for the ope order to make your child's sea eam communication between of needed at practices & fill-in o we a limited schedule, but can	eration & success of our ason a success: City & Parents, sets prac n games when Head Co help out when/where	r programs. Please s ctice dates & location ach can't make it, conneeded at practice &	ons, facilitates ga oordinate snack & games)	me play)

Cash

Card

Sign back of form...



Parent/ Guardian Signature

350 N. VALENCIA BLVD. WOODLAKE. CA 93286

PHONE: 559.564.8055
FAX: 559.564.8776
EMAIL: JREYNOLDS@CI.WOODLAKE.CA.US

WWW.CITYOFWOODLAKE.COM

I	HOTOGRAPHY / VIDEO RELEASE understand that the City of Woodlake Parks and Recreation may take pictures and/or video for use in a City publication, ducational purposes or social media posts. My initials indicate approval for the use of such photography/video in which or my child may appear. I understand that I will not receive compensation for the use of the pictures/video.
l fo	EFUND POLICY understand that the City of Woodlake Parks and Recreation, as a rule, does not offer refunds. Your registration is used or team, facility, referee, uniform, and staffing coordination and planning for the season. Special situations can be iscussed. My initials indicate acknowledgement of the refund policy.
during the cu	RELEASE e consent for the previously-mentioned player to participate in the City of Woodlake Parks and Recreation Programs urrent season. I give permission to the league, its officers, or representatives, to provide medical treatment in case of cy or injury to the above registered player.
	WOODLAKE PARKS AND RECREATION RELEASE. WAIVER OF LIABILITY AND ASSUMPTION OF AGREEMENT FORM. READ CAREFULLY BEFORE SIGNING.
programs, ar <i>including, bu</i>	tion of being allowed to participate in the City of Woodlake Parks and Recreation, athletic sports or recreation and related events and activities, the undersigned acknowledges, appreciates, and agrees that the risk of serious injury at not limited to, permanent paralysis, injury, and death, is significant and does exist, even though particular rules, and personal discipline may reduce the risk. Therefore:
•	VINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE ITY OF WOODLAKE or others, and assume full responsibility for my participation;
SIGNIFICA	gly agree to comply with the stated and customary terms and conditions of participation. IF I OBSERVE ANY UNUSUAL ANT HAZARD DURING MY PRESENCE OR PARTICIPATION, I WILL EITHER REMOVE THE HAZARD, IF POSSIBLE, OR INUE MY PARTICIPATION and/or bring such hazard to the attention of the nearest official immediately; and
	NGLY AGREE TO COMPLY WITH ALL STATE GUIDELINES as directed by the State of California for participation and g in regard to PROTECTION AGAINST INFECTIOUS DISEASE INCLUDING COVID-19.
Woodlake sors of th	nyself, my heirs, assigns, personal representatives and next of kin, hereby RELEASE AND HOLD HARMLESS the City of e, their officers, officials, agents, employees, volunteers, other participants, sponsors, advertisers and owners and lese premises used to conduct the event, for ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or ARISING FROM THE NEGLIGENCE of the above named organization.
the significar provided abo liabilities for	tify that I, as parent or legal guardian, have LEGAL RESPONSIBILITY for this participant. I have read and understand note of this RELEASE AND WAIVER and do consent and agree to his/her waiver, release and assumption of the risk as ove. I release and agree to indemnify and hold harmless the City of Woodlake and associated persons from any and all injury or damage to the above minor while participating in these programs ARISING FROM THE NEGLIGENCE of the blake and associated persons.

Date