

**SUMMER BASKETBALL REGISTRATION**  
**SEA ISLE CITY RECREATION DEPARTMENT**

6108 Central Avenue, Sea Isle City, NJ 08243

Phone: (609) 263-0050

E-mail: [sicrec@seaislecitynj.us](mailto:sicrec@seaislecitynj.us)

**Please complete entire form, sign and RETURN WITH PAYMENT (check or money order) to address listed above.**  
**ONE APPLICATION PER PARTICIPANT / FORM MUST BE POSTMARKED BY JUNE 3, 2017**

Name of participant: \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_

Phone # (emergency, rain outs & team info): \_\_\_\_\_

Address: \_\_\_\_\_

Birth date: \_\_\_\_\_ Age: \_\_\_\_\_ Grade (going in to): \_\_\_\_\_

E-mail address: \_\_\_\_\_

Emergency contact (name & phone#): \_\_\_\_\_

Medical restrictions/info.: \_\_\_\_\_

- INSTRUCTIONAL BASKETBALL** – Ages 4 – 5, 9:30 am - 10:15 am; Ages 6 – 7, 10:30 am - 11:15 am, Tuesdays and Thursdays, \$15/session
  - Session I** - July 11, 13, 18, 20, 2017
  - Session II** - July 25, 27, August 1, 3, 2017
- INTERMEDIATE GIRLS BASKETBALL** - Ages 8 – 10 Sundays, Mondays and/or Thursdays; Evenings Beginning July 6, 2017, \$35.00/participant
- INTERMEDIATE BOYS BASKETBALL** - Ages 8 – 10 Sundays, Mondays and/or Thursdays; Evenings Beginning July 6, 2017, \$35.00/ participant
- JR. GIRLS BASKETBALL** - Ages 11 – 13 Sundays, Mondays and/or Thursdays; Evenings Beginning July 6, 2017, \$50.00/ participant
- SR. GIRLS BASKETBALL** - Ages 14 – 17 Sundays, Mondays and/or Thursdays; Evenings Beginning July 6, 2017, \$50.00/ participant
- JR. BOYS BASKETBALL** - Ages 11 – 13 Tuesdays & Fridays; Evenings Beginning July 7, 2017, \$50.00/ participant
- SR. BOYS BASKETBALL** - Ages 14 – 17 Tuesdays & Fridays; Evenings Beginning July 7, 2017, \$50.00/ participant

**\*NO BASKETBALL REQUESTS WILL BE TAKEN UNLESS SIBLINGS (SIBLING REQUEST MUST BE WRITTEN – THIS IS NOT AUTOMATIC) NO EXCEPTIONS.\***

- VOLUNTEER BASKETBALL COACH** – (Please check one) Intermediate Girls \_\_\_\_\_, Intermediate Boys \_\_\_\_\_, Jr. Girls \_\_\_\_\_, Jr. Boys \_\_\_\_\_
- VOLUNTEER SENIOR GIRLS / BOYS CAPTAIN** – (Name & phone#) \_\_\_\_\_

**WAIVER FOR PARTICIPANT**

In consideration of your accepting my child's entry, I hereby, for myself, my child, my heirs, executors and administrators, waive and release any and all rights and claims for damages I or my child may have against the above park district or school district and its representatives, successors and assigns for any and all injuries suffered by myself or my child at any activity sponsored by these groups.

- Registration fee does not include Medical Insurance. - No refunds will be issued unless it adheres to the City of Sea Isle City policy.
- No switching or transferring of activities. - Registration is taken on first come/first serve basis with limited enrollment.

Parent Signature: \_\_\_\_\_

Below for office use only:

Fee Paid: \_\_\_\_\_ Check one: Check # \_\_\_\_\_ Money Order # \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

**MEDIA RELEASE (OPTIONAL)**

I, \_\_\_\_\_ do hereby give the City of Sea Isle City, Sea Isle City Tourism Commission and 7 Mile Publishing (his, her, its) assigns, licensees and legal representatives the irrevocable right to use my name, picture, portrait or photograph in all forms of media and in all manners, including composite or distorted representations for tourism promotion, advertising, trade or any other lawful purposes, and I waive my right to inspect or approve the finished product, including written copy, that may be created in connection therewith.

**CONSENT**

I am the parent and/or guardian of the minor, \_\_\_\_\_, and have the legal authority to execute this release. I approve the foregoing and waive any rights in the premises.

Signed: \_\_\_\_\_ Witness: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
Date: \_\_\_\_\_