

CALVARY HOOPS



*****Turn in to your homeroom teacher by Jan. 4th*****

\$85 includes uniform shirt and trophy - Registration deadline Jan. 4th.

Participant's Name _____

Parent/Guardian Name(s) _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Email Address _____

Father's cell Phone _____ Father's Employment _____

Mother's cell Phone _____ Mother's Employment _____

Are you a member of a church? _____ If yes, where? _____

Age _____ Birthdate _____ Grade _____ Gender: Male/Female

COACH REQUEST _____ TEAM PLAYER REQUEST _____

*****ABSOLUTE NO REQUEST FOR BOYS AND GIRLS 11-13*****

LEAGUES: (COED 5/6) (COED 7/8) (COED 9/10) (GIRLS 11/13) (BOYS 11/13)

Uniform Size (Please circle one)

YOUTH: x-Small Small Medium Large

ADULT: Small Medium Large X-Large XX-Large

Person (other than parent) authorized to act for parent in an emergency

Home Phone _____ Work Phone _____

Release of All Claims

In consideration for my child being allowed to participate in activities sponsored by Calvary Baptist Church, I hereby release, discharge, indemnify, and agree to hold harmless Calvary Baptist Church, its directors, officers, employees, agents, and all volunteer personnel from any and all liability for personal injuries and/or damage(s), injury or illness that may be suffered by the above participant.

I/we further agree to indemnify and hold harmless Calvary Baptist Church, its directors, officers, employees, agents, and all volunteer personnel from any claim and/or damages it, or its agents are required to pay as a result of any injury or damage including reasonable attorney fees, litigation expenses, and court costs.

Parent/Guardian Signature _____ Date _____

*******Registration is not complete until payment of \$85 is made in full by Jan. 4th.*******

For Office use Only: Paid Cash or Check # _____ Amount _____ Date _____ Initial _____