

BASKETBALL REGISTRATION FORM

Simpsonville UMC Basketball 2017-2017

Return form to church along with \$85 to play. We ask that each player fill out a registration form as completely as possible. These forms will travel with the team coaches to area games and will be necessary in case of an emergency.

Name of Player _____ Birth date _____

Address (please include city and zip) _____

Home Phone _____ Emergency Phone _____

School _____ Gender _____ Grade _____ Age _____

Parents Email _____

Are you a member of Simpsonville UMC? YES NO

If you are not a member of Simpsonville UMC, where do you worship?

To play basketball you must be a member at SUMC, **or** regularly attend SUMC programs or worship, **or** regularly attend a church with no basketball program.

I will regularly attend SUMC _____ I regularly attend church at _____

Note: The District does not allow kids to play on both a school team and a church team. You can sign up for church and if you make your school team, you can drop the church team.

T-shirt information (If you are using a shirt from last year, please subtract \$5.00 from registration fee)

_____ T-shirt sizes: YS YM YL S M L XL XXL

AREAS IN WHICH OUR FAMILY CAN HELP - CHECK AREAS THAT SUIT YOUR TALENTS

_____ Help with the concessions

_____ Help to run the clock/game books

_____ Be a team mom or dad

_____ Collect door admission fees

_____ Assist with the year-end banquets

*It is our goal to have as many people actively participating in this program as possible.
If there is an area that you would like to serve, that I have not mentioned, please write it down below.
We ask everyone that has a child in the basketball program to participate in helping the program's needs.*

Insurance Policy – As complete as Possilbe

Health Insurance Carrier _____

Policy #: _____

Emergency Contact _____ Relationship to player _____

Telephone _____

Physician's Name _____ Physician's Telephone _____

Identify additional information about the player's allergies, or behavior and physical, emotional, or mental health about which the leaders should be aware of: _____

As the parent or legal guardian of the minor Player named above, I acknowledge and agree to the following:

A. The Player has no medical condition which would preclude him/her from full participation in the game of basketball and is fit for that activity. SUMC makes no determination concerning a Player's fitness, physical or otherwise.

B. I hereby authorize SUMC as well as its employees, agents and volunteers to render first aid to the Player and, further, to make all necessary arrangements for medical treatment that may be required under the circumstances.

C. On behalf of myself and the Player, I do hereby release and shall hold harmless SUMC as well as its employees, agents and volunteers from and against any and all claims for personal injury (to include death) arising out of, or related in any manner to, Player's participation in the game of basketball unless said claims are proximately caused by the gross negligence or willful misconduct of SUMC or its employees, agents or volunteers.

D. I consent that any photos, video or sound recordings of the Player's activities or works from participating in Simpsonville United Methodist Church (SUMC) activities are the sole property of SUMC and may be used by us for any legal purpose without payment to you. Such uses may involve the inclusion of such photos, video or sound recordings in any materials (including our website, publications, promotions, advertisements, or other materials), whether as originally taken or as modified by us.

Parent's Signature _____

Bottom to Be Filled Out By Church Leadership

Team _____

Paid _____

Pastor Appeal _____

T-Shirt/Jersey _____

Insurance Card _____

Birth Certificate _____