



Guelph C.Y.O. BASKETBALL
 "Share the ball, Win it all"



2010-2011 PLAYER REGISTRATION FORM

houseleague.guelphcyobasketball.ca

CELEBRATING OUR 22nd YEAR!

EARLY REGISTRATION for Players and Siblings (Save \$10/player). **DEADLINE - JULY 31st**
OPEN Registration for House League will occur in September at the West End Recreation Centre. 9-12 Noon.

Please complete **ONE** multi copy registration form for **EACH** player.

The **FEES** for **Registration** for the 2010/2011 season are as follows: (CIRCLE one below)

EARLY FEES: Per family member: 1 - \$100 2 - \$190 3 - \$270 4 - \$350 **MIDGET-\$100**

OPEN FEES: Per family member: 1 - \$110 2 - \$210 3 - \$300 4 - \$390 **MIDGET-\$110/player**
 (After July 31st) (Co-ed - Sunday's - Sept. to Dec.)

Please make **cheques** payable to: **K of C CYO Basketball League Inc.** NSF Cheque fee - \$25

Paid: _____ Cash _____ Cheque

NO POSTDATED CHEQUES OR REFUNDS

EARLY Registration Forms **MUST** be **POSTMARKED** by **July 31st** OR **WILL BE RETURNED.**

Mail to:

K of C CYO Basketball League Inc., P.O. Box 31039, Guelph, Ontario, N1H 8K1 .

Player's Name: _____

Birth Date: Day _____ Month _____ Year _____ Height: _____ ft. _____ in.



Address: _____ Postal Code: _____

Phone: _____ Emergency Phone: _____

Elementary School: _____ Family Email Address: _____

Basketball Experience (years) : School _____ House _____ Rep _____ Club _____

Age Division: (age as of December 31, 2010) Please Circle: Gender: Male Female & Circle :

Minor Rookie-5/6/7 (Born In: 2005-04-03)	Rookie-8/9 (2002-01)	Minor Bantam-10/11 (2000-1999)	Bantam-12/13 (1998-97)	Midget-14/15/16 (1996-95-94)
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PARENT/GUARDIAN/HIGH SCHOOL STUDENT: CYO needs YOU as a Volunteer---PLEASE Check One Of:

Convenor: _____ Coach: _____ Scorer/Timer: _____ Volunteer's Name _____

How did you hear or read about CYO? _____

Please **Read** the following and **sign** below:

The participant and the undersigned parent of the participant agree that the Guelph Catholic Youth Organization Basketball Inc., its organizers, directors, convenors, coaches, referees and volunteers shall not be responsible or liable to the participant, the parent, or anyone claiming through either of them for any injury, accident or loss however caused, and hereby release and forever **discharge** the Guelph Catholic Youth Organization Basketball Inc., its organizers, directors, convenors, coaches, referees and volunteers from all claims, actions, causes of action, claims or demands which may arise as a result of or by reason of any accident, injury or loss.

In signing below we also acknowledge that we have been advised to consider arranging insurance for injury or loss.

This information is collected for CYO use only.

Both PARENTS NAMES (print): _____ DATE: _____

PARENT'S SIGNATURE: _____ REGISTRAR : _____

(Please keep Copy for your records and TAX Receipt - other copy to CYO)