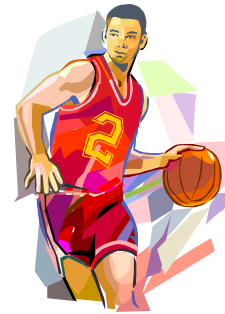


Maumelle Youth Basketball

2011 / 2012

Registration



PLAYER NAME:						
School Grade :	3	4	5	6	<i>(circle one)</i>	
School:				YS	YM	YL
**Open to male students only residents of 72113 or 72118 zip code or attend Maumelle school				AS	AM	AL AXL

Parent/Guardian #1		Parent/Guardian #2	
Name		Name	
Address		Address	
City, ST, Zip		City, ST, Zip	
Main Phone		Main Phone	
Add'l. Phone		Add'l. Phone	
Email		Email	

PLEASE!
Volunteer!

Our kid's NEED you!!

Coach

Assistant Coach

Emergency Contact

Name	
Phones	
Relationship	

REGISTER EARLY
AND SAVE!!!!

After October 17, FEE:
After October 31,
Late registration:

(residents) \$65.00 ******(non-residents \$75)

(residents) \$85.00 ******(non-residents \$95)

(residents) \$105.00 ******(non-residents \$115)

Must be approved by MYBA President

Fee includes uniform

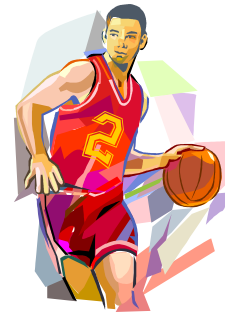
No refunds granted after Oct. 31 due to uniform orders

****Resident is 72113 zip code only. The only Non-residents allowed are zip code 72118 or attend Maumelle School ONLY**

Date Paid:	
Amt:	\$
Chk#:	

Maumelle Youth Basketball

2011 / 2012 Registration



Consent to Communications: I understand that by providing my mailing address, email address and telephone number, I consent to receive communications sent by or on behalf of the Maumelle Youth Basketball Association (“MYBA”), its member organizations and their representatives via email.

Consent to Publications: I hereby give the MYBA, its member organizations and their representatives the irrevocable right to use my or my player’s name, picture, photograph, or other likeness in all forms and media, and in all manners that concern MYBA. This includes, but is not limited to, print and the web. I waive the right to inspect or approve the finished version(s), including any written copy that may accompany it.

Waiver and Indemnity Agreement: Acceptance of my player’s entry/application is without responsibility of any kind by the MYBA, the City of Maumelle, committees, or the management of any event in which my player may be entered or may participate. In consideration of the acceptance of my entry, I do hereby for and on behalf of myself and my heirs and legal representatives release and forever discharge MSA and the host clubs, their officers, committees and representatives and their successors and assigns, of and from any and all claims, demands, injuries, however arising, whether caused by negligent or intentional acts of the MYBA and its representatives or other sponsoring entities, or by third parties, which injuries may be related to myself or my player’s activities during regular season play or during tournaments at any time and any period traveling to or from these events described, and all such claims are hereby waived and released, and I covenant not to sue therefore. The parent or guardian, by signing below, does hereby agree to indemnify and hold harmless the MYBA and its representatives and the sponsoring entity from any liability which they may incur to themselves or the player/entrant, howsoever arising and whether caused by the negligent or intentional acts of the MYBA its representatives or the sponsoring body.

Medical Release: I hereby consent to emergency medical and/or hospital service that may be rendered by or at accredited hospitals, by appointed physicians, in the event such need arises, in the opinion of a duly licensed physician and if I am not present to select medical facilities and a physician of my choice.

I have read and understand the foregoing releases, waivers and indemnity agreement.

Signature of Parent/Guardian: _____ Date: _____
(must be over the age of 18)

Emergency Contact Name: _____ Phone: _____