Woodland Parks & Recreation Department

2001 East Street ● Woodland, CA 95776 ● Phone: (530) 661-2000 ● www.cityofwoodland.org/parks&rec

SENIOR BASKETBALL REGISTRATION FORM 2012

First Name	*Last Name*	*Date of Birth (mm/dd/yy)* ***Players are eligible if turning 40 or 50 in 2011***	*Height*

Address	*City*	*State*	*Zip*

( )	☐ Home ☐ Cell	( )	☐ Home ☐ Cell	
Phone 1		*Phone 2*		*Email Address*

☐ No ☐ Yes ***Would you be interested in managing a team?***

☐ Guard ☐ Forward ☐ Center ***Position***

☐ No ☐ Yes ***Do you want to be on a different team from last year?***

Last year's Team Name _____

Preferred Team _____

☐ Large ☐ XL ☐ XXL ***Shirt Size***

	Division	Night	League Entry Fees
☐	**Early Registration before 10/12/12**		$20.00 off
☐	**50 & Over**	Monday	$80 ($100 for Non-Residents)
☐	**40 & Over**	Wednesday	$80 ($100 for Non-Residents)
☐	**35 & Over**	Thursday	$80 ($100 for Non-Residents)
☐	**Multiple Team** ***Select each night that you wish participate in.**	Multiple Team	$80 ($100 for Non-Residents) ***Multiple Team Discount: 2 Nights $130 or 3 Nights $150***
	Payment Type	☐ Cash ☐ Check ☐ Credit Card	Total Paid $_____._____ CC# _____-_____-_____-_____EXP____/____ Check No._____

Waiver of Liability, Medical release and Indemnification agreement for minor and adult participant

1. In consideration of the acceptance of my application for entry in the above event or class, I hereby waive, release, and discharge any and all claims for damages for death, personal injury, or property damage which I may have as a result of my participation. This release is intended to discharge the City of Woodland and its agents and employees from and against any and all liability arising out of or connected in any way with my participation in said event or class, even though liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above.
2. I understand that serious accidents occasionally occur during recreational activities, sports, outdoor activities, or fitness activities, and that participants occasionally sustain mortal or serious personal injuries, and/or property damage, as a consequence thereof. Knowing the risks of the particular activity for which I have registered, I hereby agree to assume those risks and to release and hold harmless all of the persons or entities mentioned above who (through negligence or carelessness) might otherwise be liable to me (or my heirs or assigns) for damages.
3. It is further understood and agreed that this waiver, release, and assumption or risk is to be binding on my heirs and assigns.
4. I give the City of Woodland the right to use photographs of me and my child(ren), participating in this program, in its own promotional materials.
5. We will make good any loss or damage or cost the above entity may have to pay if any litigation arises on account of any claim made by said minor or by anyone on said minor's behalf.
6. In the event that said minor requires medical or surgical treatment while under the supervision of said entity personnel in connection with the described activity, such supervisor may authorize treatment; we will pay all medical, hospital, or other expenses which said minor may incur as a result of such treatment

I agree to accept and abide by the rules and regulations of City of Woodland.

Applicant's Signature *Date*