

**SPOON'S SUMMER BASKETBALL LEAGUE
PO BOX 1171
ERIE, PA 16512
FOUNDED - 1990**

Registration Form PLEASE PRINT

Name _____

Address _____

Phone # _____ DOB _____ Age ____/Grade ____ Male ___ Female ____

Has signed up to play for Erie Housing Authority YES NO

Jersey Size Youth Adult
(circle one) [Small - Med - Large] [Small - Med - Large - XL - 2XL - 3XL - 4XL 5XL 6XL]

In case of an emergency contact _____ Relationship _____

Phone # _____ or _____

Wavier: I HEREBY AUTHORIZE THE DIRECTORS AND WORKERS OF THIS LEAGUE TO ACT IN MY BEHALF ACCORDING TO THEIR JUDGEMENT IN ANY EMERGENCY SITUATION REQUIRING MEDICAL ATTENTION. I ALSO SUBMIT THAT MY SON/DAUGHTER IS PHYSICALLY AND MENTALLY FIT TO PARTICIPATE IN THIS SUMMER ACTIVITY. I RELIEVE THIS ORGANIZATION, THE CITY, ALL SPONSORS AND VOLUNTEERS HARMLESS IF ANY UNFORTUNATE SITUATION OCCURES THAT MAY CAUSE MY SON/DAUGHTER HARM.

Signature Required _____

Mother/Father or Legal Guardian

List any Med. Problems the league should be aware of: _____

And hospital of choice _____

Has this participant had a physical during the school year?

No Yes

COMMENTS:

The league will operate under the bylaws of the NCAA Rules 14.7.5.2 and 30.15. Which allows Division I, II, and III to participate.