



City of Dana Point Community Services and Parks Department

34052 Del Obispo Street, Dana Point, CA 92629

Ph (949)248-3530 • Fax (949) 496-3497 • www.danapoint.org



YOUTH BASKETBALL REGISTRATION FORM

Registration information fields including: Have you registered with us before?, Interested in Coaching?, Adult Last Name, Adult First Name, Address, City, Zip, Home Phone, Cell Phone, Work Phone, E-Mail, and Would you like registration confirmation e-mailed to you?

Table with columns: League Barcode, League (Jr. or Sr.), Player's Full Name, Sex (M/F), Shirt Size, Date of Birth, Age as of 3/1/16, PLAYER RANKING (Seasons Played, Skill Level), and Fee.

Pairing Request section with checkboxes and fields for assistance and total fee.

PLAYER RANKING instructions: To assist staff in forming teams... Seasons Played: How many seasons of basketball league experience does your child have? Skill Level: Compare your child's basketball skill level and game knowledge with children his/her age.

Please read and sign the following: AGREEMENT, WAIVER, AND RELEASE: I have carefully read the description of class(es) which I/we are registering. In consideration for being permitted by the City of Dana Point to participate in any recreation class activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity.

PARENTAL CONSENT (to be completed and signed by parent/guardian if applicant is under 18 years of age): I hereby consent that my child(ren) named above participate in the above activity, and I hereby execute the above agreement, waiver, and release on his/her behalf.

Signature of Adult (Participant, parent/guardian) for Agreement, Waiver and Release and Date fields.

OFFICE USE ONLY table with columns: Employee Initials, Date, Check #, Cash, Entered in computer.