2011 - 2012 Warrior Recreational Basketball Registration Form

FEE = $135.00

Make checks payable to: Wilton Parks and Recreation

Participant's Name: _____ Grade: _____
Participant's DOB: _____/_____/_____ Age: _____
Parent's Last Name: _____ Parent's First Name: _____
Address: _____ Mothers Work Phone #: _____-_____
Fathers Work Phone #: _____-_____
Home Phone #: _____-_____
Email Address: _____

League Registering For:

5th & 6th Grade Girls *Activity #: 6287*	5th & 6th Grade Boys *Activity #: 6289*
7th & 8th Grade Girls *Activity #: 6288*	7th & 8th Grade Boys *Activity #: 6290*

Please circle appropriate grade group

Circle ONLY one (1) day and time period for your child's mandatory player assessment

All evaluations will take place in the Middlebrook School Old Gymnasium

	OCT. 22nd	OCT 29th
Girls 5th / 6th Grade:	8:30 AM 9:30 AM	8:30 AM 9:30 AM
Girls 7th / 8th Grade:	10:30 AM 11:30 AM	10:30 AM
Boys 5th / 6th Grade:	12:30 PM 1:30 PM 2:30 PM	11:30 AM 12:30 PM
Boys 7th / 8th Grade:	3:30 PM 4:30 PM	1:30 PM 2:30 PM 3:30 PM

Circle ONLY ONE (1) and only ONE evening the participant CAN NOT PRACTICE!:

Monday **Tuesday** **Wednesday** **Thursday** **Friday**

NOTE: The Wilton Recreation Department will do the best we can to accommodate the requests of evening practice conflicts. There are ***no guarantees we will be able to accommodate everyone***. Once the teams have been formulated, **NO ONE** will be allowed to switch teams. There will be **NO EXCEPTIONS TO THIS RULE!**

I understand that there are inherent risks and dangers in any and all activities including the one(s) for which I have registered for myself and/or my child/ward. I also understand that there is a heightened risk and danger for myself and/or my child/ward and others by participating in the prescribed activity. Nevertheless, I agree to defend and hold harmless and to indemnify the Town of Wilton, the Wilton Parks and Recreation Department, its members, agents, officers, and employees and any person there within from any and all claims, actions, demands, damages, costs, and loss of services, expenses, including but not limited to attorney fees, and compensation on account of, or in any way growing out of, or arising from, my and/or my child/ward's participation in the designated activities, including but not limited to, negligence claims for bodily injury, sickness, disease or death or property damage of any kind, against any and all of the aforementioned parties, whether or not such, claim, demand, damage, cost, loss or expense is caused in part by a party indemnified hereunder. The execution of this Release is done with my full knowledge and appreciation of the act and its ramifications and is free from coercion of any kind by the Town of Wilton, the Wilton Parks and Recreation Department, their members, agents, officers, and employees. I represent that I have carefully read and understand this Release and that I have entered into this Release knowingly and voluntarily after having had an opportunity to consult with my legal advisors, which I am encouraged to do by the Town of Wilton. I further understand that I am waiving substantial rights by signing this release. I further understand that I and or my child/ward may be photographed for the purpose of promotion or advertising in future brochures, newspapers, newsletters, or in the Town of Wilton website. By signing this release, I am also giving permission to the Town of Wilton to use the photos of me and/or my child/ward for any of the aforesaid purposes.

Signature: _____ **Date:** _____/_____/_____