

# Ballenger Creek Rec Council Basketball Registration Form

BCRC AND THE FREDERICK COUNTY COMMISSIONERS DO NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, SEX, RELIGION, AGE OR DISABILITY FOR EMPLOYMENT OR THE PROVISION OF SERVICES. SPECIAL ACCOMMODATIONS CAN BE REQUESTED THROUGH PARKS & RECREATION AT 301-694-1646.

Player Name: \_\_\_\_\_ Parents: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (c) \_\_\_\_\_

Guardian: \_\_\_\_\_ Emerg Contact: \_\_\_\_\_

Email1 \_\_\_\_\_ Email2 \_\_\_\_\_

Age On Sept 1st: \_\_\_\_\_ DOB: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Prior Experience: \_\_\_\_\_ Prior Coach: \_\_\_\_\_

**The following are requests only, we cannot guarantee they will be fulfilled. If your child will absolutely not play on any team except his friends, and you are a late sign up please do not sign them up.**

Cannot practice on: \_\_\_\_\_ Same Team As: \_\_\_\_\_

School: \_\_\_\_\_ Physical Limitations: \_\_\_\_\_

You will be automatically be linked to the Uniform Order page once you have completed your payment.

**Volunteers Needed:** There are times when we are in need of coaches due to too many players, in which case we may have to disband the team. If your child is one of these players would you be willing to:  
Coach [  ]

**Additional Volunteers Needed that are willing to Asst Coach [  ] Fund Raise [  ] Referee [  ] Team Mom [  ]**

Is the player involved in any other organized B-Ball Program? Yes [  ] No [  ]

If Yes, please describe: \_\_\_\_\_

Divisions With Age As Of Sept 1st (circle one)

**Girls:** Under 10 12 14 19

**Boys:** U10 U12 U14 U16 U19

Waiver: As the parent/guardian of the above mentioned child, I authorize my child's participation in all activities of the Rec Council. I assume all risks incidentals to such participation both during an activity and in route, and do hereby hold harmless the county commissioner, the city of Frederick, Dept of Parks and Recs, and Ballenger Creek Rec Council, and the staff, coaches, Volunteers, and participants. I grant permission for emergency 1st aid to be administered to my child.

Parents Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Registration Deadline is the day prior to each of the age group's draft night, or you may register in person at the gym on the night of the draft. Draft nights are posted on the web site at the beginning of the season and is usually the third week in Oct. Late registration accepted, see web site for further details on late registrations, however, to insure placement register early.

Please email all questions to Michael.Munoz@BCRCBasketball.com, or visit our web site at WWW.BCRCBASKETBALL.COM

NO REFUNDS WILL BE ISSUED PRIOR TO JANUARY 1ST OF THE CURRENT SEASON CALENDAR.

CHECKS RETURNED FROM THE BANK WILL CARRY A \$35 RETURN FEE AND RESULT IN THE SUSPENSION OF THE PLAYER FROM ALL TEAM ACTIVITIES UNTIL THE SITUATION IS RESOLVED.