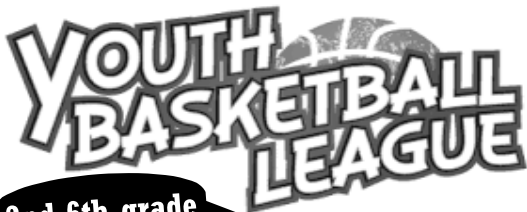


Richmond Parks & Recreation Department



2nd-6th grade

The purpose of the Richmond Parks & Recreation Department Basketball League is for the participants to have fun and to learn the fundamental skills of basketball as well as working towards the following goals: learning team-work, building self-esteem, teaching social and physical skills, creating a fun experience for youth, teaching decision making, responsibility, leadership and respect for authority, as well as other character traits.

Registration Fee: 1 child-\$85.00 (each additional child in household-\$80.00)

Games start beginning of January (TBA). Hosting towns involved on game day: Richmond, Lexington, Odessa, Higginsville, Lone Jack, Oak Grove, Orrick, Concordia, & possibly other towns. Coaches will have more information about practice days/times after 11/20/24. Practices start in the week of 12/1/24

REGISTRATION DEADLINE: NOVEMBER 5, 2024

Late entry forms will be accepted until teams are full after deadline.

Late entry fee (after registration deadline): an additional \$15/ child (no multi-child discount)

- Divisions are based upon the participant's grade during the 2024-2025 school year.
- Participant may play up one division if requests to do so.
- Must be in at least 2nd grade in order to sign up for this basketball league.

Division of play: 2nd/3rd Boys 2nd/3rd Girls 4th/5th Boys 4th/5th Girls 6th Boys 6th Girls

Participant's Name: _____ Date of Birth: ____/____/____

Participant's age as of 11/20/24: _____ Grade: _____ Male: _____ Female: _____

Shirt Size: YXS YS YM YL AS AM AL AXL AXXL Shorts Size: YXS YS YM YL AS AM AL AXL AXXL

Parent/Guardian Name: _____ E-mail: _____

Address: _____ City: _____ Zip Code: _____

Cell Phone: _____ Cell Phone: _____ Work Phone: _____

Emergency Contact (other than names above) _____ Phone: _____ Relationship: _____

Heath concerns of the participant the coach should be aware of: _____

I am interested in volunteering as: Head Coach: _____ Shirt Size: AS AM AL AXL 2XL 3XL

Head coach picks one assistant coach: _____ Shirt Size: AS AM AL AXL 2XL 3XL

If you are selected to be a coach, the Parks and Recreation department will contact you on or before draft dates.

Drafts & Coaches meeting will be: 6th grade girls:11/20/24 @ 7:15pm. 6th grade boys:11/20/24 @ 7:15pm. 4th/5th grade girls: 11/20/24 @ 6:30pm. 4th/5th grade boys: 11/20/24 @ 6:30pm. 2nd/3rd grade girls: 11/20/24@ 5:30pm. 2nd/3rd grade boys: 11/20/24 @ 5:30pm; Location: Richmond City Gym (205 Summit St.)

I, the parent/ guardian of the above named candidate for a position on a recreation team, hereby give my approval to participate in any and all recreation activities, including transportation to and from the activities. I am aware that participation in the youth basketball may result in serious injuries and protective equipment does not prevent all injuries to players. I hereby waive, release, absolve, indemnify and agree to hold harmless the Richmond Parks & Recreation Departments, City of Richmond, the organizers, sponsors, supervisors, officials, participants and persons transporting my child to and from activities for any claim arising out of any injury to my child whether the result of negligence, or for any other cause. I agree to return equipment issued to my child in as good of condition as when received it, except for normal wear and tear. In addition, I agree, understand, and allow the City of Richmond to take and use my or my child's photograph, likeness, name, statement, or video. I understand that the City of Richmond may use the photograph, likeness, name, statement or video for the purposes of publication, presentation, websites, and social media channels. I have read and fully understand the above program details and waive and release all claims.

If a "special request" is made, the Richmond Parks & Recreation Department cannot guarantee that the request will happen. Our teams are selected by the coaches through a draft. If you have a "special request" (such as you want your child to be on a certain team, with a certain coach, not with a certain coach, or on the same team as another participant) please write your request here: _____

Coaches will see your request. Again, we will try our best to follow through with your request, but it is not guaranteed. Siblings or others living in the same household will be placed on the same team. **Once a participant is placed on a team they will not be switched.** No Refunds.

Signing below means you are aware this is a game for the KIDS to have FUN and that you have read and agree with the above.

Parent/Guardian Signature _____ Date _____

Please return to the FRONT DESK OF CITY HALL, 205 Summit, Richmond, MO 64085.

Make checks payable to: City of Richmond

Richmond City Hall Hours: Monday-Friday, 8:00am-4:30pm

If after 4.30pm, you may put this form/money in the "After Hours" box outside of City Hall—NO CASH IN THE "AFTER HOURS" BOX. IF YOU DO NOT PAY THE FULL AMOUNT STATED ABOVE, AT THE TIME YOU RETURN YOUR FORM, YOUR CHILD WILL NOT BE ELIGIBLE TO PLAY IN THE LEAGUE. NO EXCEPTIONS. **QUESTIONS? Please e-mail: Hwilliams@cityofrichmondmo.org**