Minonk Parks and Recreation Basketball

Child's Name	e:								
Grade Level	as of S	Sept. 20	23:						
Parent/Guardian Phone 1:						Nan	ne:		
Parent/Guardian Phone 2:					Name:				
Parents/Guardian:					E-mail:				
Address:									
Health Proble	ems:								
Please Circle Appropriate Division									
Pre-K/Kindergarten (co-ed)							\$35		
1st & 2nd grade (co-ed)							\$35		
Girls 3rd & 4th							\$35		
Boys 3rd & 4th							\$35		
Please Circle Appropriate Size									
Shirt Size:	YS	YM	YL	AS	AM	AL			
Shirt #:	1st Choice 2nd C				Choice_		3rd Choice		
Are you interested in Coaching? Y/N						If YES, Name:			

Are you CPR certified if coaching? Y/N **(At least one coach or adult must be CPR certified to use gymnasiums in our district for practice)**

I am aware that activity may result in serious injuries and protective equipment does not prevent all injuries to players. I do hereby waive, release, absolve, indemnify, and agree to hold harmless the Minonk Parks and Recreation board, the City of Minonk, the organizers, sponsors, supervisors, participants, and persons transporting my/our child to and from activities, whether negligent or of any other cause. I/We agree to return upon request any equipment issued to my/our child in as good condition as when received, with the exception of normal wear and tear. I hereby agree to these terms and agreements.

Signature: _____ Date: ___/___/

Deadline for signup is 5 p.m. on 1/5/2024. Please remit forms and payment to Minonk City Hall. Checks made to Minonk Parks and Rec.