



Jennings Recreation Basketball League

January 12th-March 19th

8720 Jennings Station Rd
Jennings, MO 63136
314-388-3040 Ext 5
Cell 314-973-3698
egreen@cityofjennings.org

WE ARE NOW ACCEPTING TEAMS AND PLAYER APPLICATIONS

Grades k-8th Boys & Girls

(B)Rec Division k-4th, (A) Advance Division 5th- 8th

Team entry Cost, (IF YOU BRING A TEAM: \$350), or Kid cost is \$60 a kid, includes child uniform. Half of your fee is due 12/12/2017 with Balance due 1/9/18 Special discount if you pay by Nov 30th
Where: Jennings Schools

Team Name _____

NAME: _____ AGE: _____ GRADE: _____ SEX: M / F (A) Division _____ (B) Division _____

Special needs _____

ADDRESS: _____ ZIP: _____ COACH PREFERENCE _____

PARENT / GUARDIAN _____ PHONE _____ CELL _____

PLAYER SHIRT SIZE: YS YM YL AS AM AL XL 2XL PLAYER SHORT SIZE: YS YM YL AS AM AL XL 2XL

IF YOU ARE WILLING TO BE A HEAD COACH PLEASE PRINT YOUR NAME.

Head Coach _____ Phone _____ Email _____

Jennings Recreation/Ferguson community Center Hold Harmless Policy Waiver and Release of all Claims
By my signature I recognize and acknowledge that there are certain risks of physical injury to participants and I voluntarily agree to assume the full risk of any and all injuries, damages, or loss, regardless of severity that my minor child/ward or I may sustain as a result of participating. I further agree to waive and relinquish all claims I or my child/ward may be entitled to as a result of participation. I also understand that the City of Jennings exercises a hold harmless policy at all facilities and fields. This releases the City of Jennings, its agents, representative or employees from any and all claims which may arise out of an accident or injury Cause by negligence of the city of Jennings or its agents, representative or employee while using city facilities or fields. I agree to the unreserved use of my child's name and /or likeness (including photographs, videotapes and other depictions) for publicizing Jennings Recreation programs and events. I have read and fully understand the above information.

Signature _____ Date _____ Team Name _____

(Office use only)
Payment _____ Date _____ Rec'd by _____ Receipt _____