

**Fredon Township Recreation League  
Basketball Registration 2012-2013  
Grades 3-8 "NOT A SCHOOL SPONSORED EVENT"**



Child's Name \_\_\_\_\_ Current Grade \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Age \_\_\_\_\_ Birth Date \_\_\_\_\_ Male/Female \_\_\_\_\_ Phone # \_\_\_\_\_

Previous Coach \_\_\_\_\_

**PHYSICIAN'S NAME** \_\_\_\_\_ **PHYSICIAN'S PHONE #** \_\_\_\_\_

Allergies or Medical Problems: \_\_\_\_\_

Phone Number (Daytime) \_\_\_\_\_ (Evening) \_\_\_\_\_

EMERGENCY CONTACT NAME \_\_\_\_\_

EMERGENCY CONTACT PHONE \_\_\_\_\_

**AUTHORIZATION:**

I hereby authorize the Fredon Recreation League and its authorized coaches or league officers to obtain all necessary medical care for my child in the event of an emergency, and hereby authorize any licensed physician/and or medical personnel to render all necessary medical treatment to my child.

**I UNDERSTAND** that the registration fee is paid to partially cover necessary costs. No child is entitled to keep or destroy any league property. Any cost incurred by the League via action or inaction by the child and/or appropriate guardian/parent can be billed in full and collection pursued to the full extent of the law.

**I UNDERSTAND** that the League purchases "secondary type" medical and liability insurance; personal family medical plan represent "primary medical" plan coverage for my child.

**I UNDERSTAND** that as a spectator I have an obligation to act responsibly, and exhibit good sportsmanship at all times.

**I HEREBY GIVE MY PERMISSION FOR MY CHILD** \_\_\_\_\_ (Child's Name) to participate in Recreation Basketball sponsored by the Fredon Recreation League.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

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**REGISTRATION FEE:** \$65.00 per child  
 \$30.00 each additional family member  
 \$25.00 late fee for registration forms received after October 26, 2012

**MAIL TO:** Fredon Recreation – Basketball (Checks Payable to Fredon Recreation Basketball)  
 3 Spyglass Hill Questions?  
 Newton, NJ 07860 Aaron Copeman: (914) 456-9667

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**Volunteers (Please select one of the following):**

Coaching \_\_\_\_\_ Asst. Coach \_\_\_\_\_ Fund Raising / Sponsorship \_\_\_\_\_ Concessions \_\_\_\_\_

***(Shirt)***

Youth: Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ Adult: Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ X-Large \_\_\_\_\_ 2XL \_\_\_\_\_

***(Shorts)***

Youth: Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ Adult: Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ X-Large \_\_\_\_\_ 2XL \_\_\_\_\_

***Practices will begin during the week of November 26th. Coaches will contact you prior to November 21st.***