



Winter Season
 Spring Season
 Summer Season
 Fall Season

PARTICIPANT INFORMATION					
FIRST NAME	LAST NAME	DATE OF BIRTH		AGE / GRADE	
STREET ADDRESS		CITY	ZIPCODE		
PARENT / GUARDIAN	PHONE	CELL	EMAIL		
SCHOOL NAME	How did you hear about us? <input type="checkbox"/> RETURNING PLAYER <input type="checkbox"/> FRIEND <input type="checkbox"/> FLYER <input type="checkbox"/> FACEBOOK AD <input type="checkbox"/> SEARCH ENGINE		JERSEY SIZE	HEIGHT FEET INCHES	
WAIVER					

By signing this form, I understand that youth sports is dangerous and serious are common even with the use of protective equipments. Injuries could include broken bones, spinal cord injuries, and concussion and others. Parents/guardians assumed all risks involved with the sports of basketball and are responsible for any medical or other expenses incurred. Henderson NJB is NOT responsible for failure to consult healthcare providers. I hereby authorize the officials of Henderson NJB to act for me according to their best judgment in emergency requiring medical attention. I hereby release, exonerate and discharge Henderson NJB from any and all actions or cause of actions known and unknown for any injuries while my child is playing or practicing basketball inside Henderson NJB game facility.

Parent / Guardian Signature	Date
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PAYMENT INFORMATION [OFFICE USE ONLY]

TYPE OF PAYMENT

CASH
 CREDIT CARD TYPE:
 VISA
 MASTERCARD
 NAME ON THE CARD _____
 Billing Zip Code _____
 CHECK
 CREDIT CARD #: _____
 Expiration Date _____
 Security Code _____

TOTAL AMOUNT: \$	CREDIT CARD HOLDER SIGNATURE:
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	REGISTRATION FEE	Credit Card Processing Fee	DEADLINE	FEES INCLUDE:	GRADE LEVEL
Regular Registration	\$ 150.00	\$ 3.50	12/31/2018	<input type="checkbox"/> Customized Uniform <input type="checkbox"/> Individual / Team Photo (Basic Package) <input type="checkbox"/> Preseason Training <input type="checkbox"/> Indoor Practice Facility - (LIMITED BASED ON AVAILABILITY)	<input type="checkbox"/> K - 1 (ROOKIE) <input type="checkbox"/> 2nd / 3rd <input type="checkbox"/> 4th / 5th <input type="checkbox"/> JHS <input type="checkbox"/> 8th (14U) <input type="checkbox"/> 14U
Late Registration Fee	\$ 175.00	\$ 3.50	1/1/2019		

*applicable to K - 5th Grade

RECEIPT WILL BE EMAILED TO THE EMAIL ADDRESS ABOVE

VOLUNTEER OPPORTUNITIES

<input type="checkbox"/> COACH <input type="checkbox"/> ASSISTANT COACH <input type="checkbox"/> TEAM PARENT			
FIRST NAME	LAST NAME	EMAIL	CELL #
STREET ADDRESS		CITY	ZIPCODE

MAKE CHECKS PAYABLE TO: HNJB