

Summer Basketball 2017

Spring Lake Recreation & Parks Department

245 Ruth Street ▪ Spring Lake ▪ NC 28390 ▪ (910) 436-0011

Eligibility: Ages 7-14 (age as of August 1st, 2017)

Age eligibility is NOT your child's age at time of registration, but age on or before August 1st 2016

Registration Deadline: Friday June 2nd, 2017

Completed registration form and birth certificate required/register online@ <https://springlake.recdesk.com>

Registration Fee: \$20 Spring Lake Residents • \$40 for Non-Residents

(Please note: **\$5 late fee applies after registration deadline**; not all Spring Lake addresses are considered to be inside the limits of the Town of Spring Lake (Cumberland County). For example: Addresses that may be listed with a Spring Lake address and zip code but are in these jurisdictions? (Harnett County or Lee County, etc)

****REFUNDS ARE NOT ISSUED AFTER 1st GAME****



Please indicate the age group that your child will be eligible to play (age as of 8/1/17):

___ 7-8 Co-Ed ___ 9-10 Boys ___ 11-12 Girls ___ 13-14 Girls ___
___ 9-10 Girls ___ 11-12 Boys ___ 13-14 Boys ___

My child played for _____ team last season (if in Spring Lake)

Child's Name _____

Date of Birth _____ Age as of Aug 1st, 2017 _____

Address _____

County _____

Gender: Male or Female Race: _____

Home Telephone Number _____

Cell Number _____

E-mail Address _____

School Name _____ Grade _____

Would you like to volunteer to help with your child's team?

Yes _____ No _____

Please call us @
(910) 436-0011

Your child's t-shirt size:

Youth _____

Or

Adult _____

Please read and Sign: I give my child permission to participate in the above named activity. I understand that Spring Lake Recreation requires insurance coverage on all participants. I am fully aware that this activity could cause injury to my child. In the event of an injury, I will not hold the Town of Spring Lake, their volunteers, employees, agents and/or representatives responsible or liable. I also give the Spring Lake Recreation Department permission to seek medical attention to my child as deemed necessary by the Recreation Staff. I also sign my child up with the knowledge that school night activity is involved and that some out of town play could take place. I also understand that my registration fee is strictly administrative and does not entitle me to a uniform or trophy.

Parent's Printed Name _____

Parent's Signature _____

Date _____

Office use only: Resident ___ Non-Resident ___ (check one) RECDESK Payment ID # _____

Date _____ Paid by cash/credit card/check# _____ Amount\$ _____ Birth Certificate _____ Staff Initial _____