

Waterloo Youth Sports Association

2004/2005 Waterloo Youth Basketball Registration Form

1. Player Information

Last		First	
Street			
City		State	Zip
Home Phone (including area code)		E-Mail	
Birthdate	Month	Day	Year
Gender			
School Grade		Shirt Size (check one box)→: Number Preference (0-99) Name on Back of Shirt	

2. Parent/ Guardian Information

Last		First	
I wish to volunteer as			
Home Phone (including area code)	Work Phone (including area code)	E-Mail	

3. Medical Information & Parent/ Guardian Authorization

Emergency Contact Name		Phone (including area code)
Relationship to Player		
Fees:		

1. I/ We, the parents/ guardians of the above named registrant for a position on a Waterloo Youth Sports Organization "WYSO" team, hereby give my/ our approval to participate in any and all WYSO activities, including transportation to and from the activities.
2. I/ We know that participation in basketball may result in serious injuries and protective equipment does not prevent all injuries to players, and pursuant to the recreational assumption of risk statute, sec. 895.525(4) Wisc. Stats., do hereby waive, release, absolve, indemnify, and agree to hold harmless WYSO and its organizers, coaches, sponsors, supervisors, participants, and persons transporting my/ our child to and from activities from any claim arising out of any injury to my/ our child whether the result of negligence or from any other cause.
3. If your child is selected by WYSO coaches and officials to play on a traveling, select, and/or All-Star team, I/ we give my/ our permission for my/ our child to participate in a traveling, select, and/or All-Star team. *(There will likely be additional costs that you must pay.)* † Yes † No

Signature: _____ Date: _____

WYSO Use Only

Grade	Birth Certificate Received	Team Drafted or Assigned to	Fee Paid
	<input type="checkbox"/> Yes Initials:		<input type="checkbox"/> Yes Initials: