

# WINTER ADULT BASKETBALL

<b>For Department Use Only</b>	
Paid ___/___/16	Staff _____
R / NR Receipt # _____	
<b><u>League/Division</u></b>	
4553 A-Division	
4554 B-Division	
Date Dropped: _____	

## REGISTRATION:

Registration begins: 9am, **Monday November 7, 2016.**  
 Registration Deadline: 4pm, **Thursday December 8, 2016.**

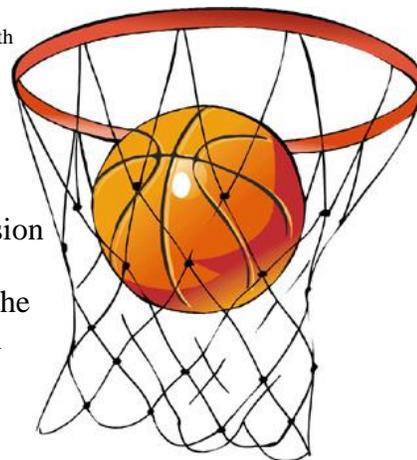
There are two divisions of play, A and B. *Players must be age 18 or older by January 1, 2017 to be eligible to register.* League play will start week of January 9<sup>th</sup> and will end mid-March. Teams must register for either the A or B Divisions.

A Division games will be played on Tuesdays and Thursdays and B Division games will be played on Mondays and Wednesdays.

A minimum of 4 teams is required to create a Division and there is a six team maximum in each Division. APR&CR reserves the right to place teams in either division once a determination has been made concerning the strength of the submitted roster.

The A Division is for more skilled teams. All teams must qualify for membership in the league through the priority point system as established by APR&CR. The registration deadline is final for all required documentation and materials. No exceptions! Registration will be held at the Apex Community Center at 53 Hunter Street during normal business hours.

Registration is by TEAM ONLY, however an individual form must be filled out by each team member.



## **FEES:**

**\$450 Team Fee**  
**\$25 per player for Non-residents.**

## **Men's League:**

- A Division**  
 **B Division**

Team Name \_\_\_\_\_ Team Captain Yes \_\_\_ No \_\_\_ Captain Name \_\_\_\_\_

Participant's Name \_\_\_\_\_ Participant's Date of Birth \_\_\_\_\_

Primary Phone \_\_\_\_\_ Other Phone (circle: Home, Cell, Work) \_\_\_\_\_

Mailing Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Special Concerns (Medical, Etc.) \_\_\_\_\_

### **STATEMENT OF WAIVER**

I, for myself or as parent or guardian, hereby assume all the risks and hazards incidental to the conduct of the activities. I release, absolve, and indemnify the Town of Apex, employees, contractors, and/or sponsors from all risks and hazards associated with the activities and in the event of injury, do expressly waive all claims against them. I understand that the Town of Apex Parks, Recreation and Cultural Resources Department provide no insurance coverage. I further give permission for proper emergency care to be rendered to myself or child should I not be available or able to give such permission.

As part of this approval, I acknowledge I may have the opportunity to review the premises, equipment and personnel qualification to be used in conducting the activity. I also have the opportunity to discuss with program organizers potential hazards and risks that may be associated with the activity and take responsibility for doing so. Failure to exercise this option indicates my approval and acceptance. I understand the Town of Apex does not provide transportation to or from activities scheduled by the Apex Parks, Recreation and Cultural Resources Department. I grant my permission to allow my and / or my child's photo, as part of a group photo and without individual identifying information, to be used by the Apex Parks and Recreation Department for promoting programs operated or sponsored by the department.

Signature \_\_\_\_\_ Date: \_\_\_\_\_