

LIMESTONE JR. BASKETBALL LEAGUE
SIGN UP FORM
2nd-3rd Division and a 4th -5th Division
Both Boys and Girls Accepted

REGISTRATION: There are three ways to register a child for Limestone Jr. Basketball.

- 1) On-site registration will be held Sunday, October 3rd at Monroe School. Please drive to the back lot and enter the new gym doors. On-site registration will be held from 10:00-12:00.
- 2) Registration forms can also be printed off from our Facebook page (Limestone Junior Youth Basketball) or the Monroe School Website (www.monroe70.org) and dropped off to main office at Monroe during the regular school day.
- 3) Registration forms can be mailed to Josh Otten, 9435 Buckingham Court, Mapleton, IL 61547

COST/Payment: \$80.00 Per Child/\$140.00 Max Per Family-More Than One Child. Checks can be made out to Limestone Junior Youth Basketball or cash is also accepted.

GOALS: This program's main purpose is to provide instruction in basketball fundamentals and introduce each player to the team concepts of basketball through game competition. Our league is open to students who attend one of our eight feeder schools. Games will be held at Limestone High School or Monroe on Sunday afternoons. Games will begin in November and end in February. Players will receive equal playing time.

HEALTH / SAFETY: The Limestone Jr. Basketball League will follow the health and safety protocol currently in place at LCHS and from all of the feeder schools. This includes any and all mask mandates that may be in place.

TRAVEL PROGRAM: The Limestone Jr. Basketball League will also host a competitive travel program for students currently in grades 4th and 5th. Travel tryouts are tentatively scheduled for October 17th from 12:00-1:30 at Monroe. Please enter the back-parking lot into the new gym doors. The cost of the travel program is \$200.00 but this does also include the cost of in-house fees. The Limestone Travel games have typically played throughout the central Illinois region with no overnight trips. If you are interested in coaching or helping coach a travel team please email – dreiley@monroe70.org.

QUESTIONS: If you have any questions please contact one of the following:

Josh Otten - joshotter11@aol.com – 309-360-6618

Darrick Reiley – dreiley@monroe70.org – 815-992-2810

Kelly Peterson – kellypetersen1026@gmail.com – 309-857-5033

PLEASE COMPLETE THE BACK SIDE OF THIS FORM

We are in need of volunteers to help coach. Please mark the yes space if interested.

PLEASE PRINT

Player's Name _____ Grade _____ School _____

Parent or Guardian's Name _____

Address _____ Ph# _____

Shirt Size: YXS ___ YS ___ YM ___ YL ___ AS ___ AM ___ AL ___ AXL ___

Email: _____ Gender: M or F

I would be interested in coaching or assisting a coach. Yes _____ No _____

CONSENT, ASSUMPTION OF RISK AND LIABILITY WAIVER

I hereby consent to allow my child, _____, to participate in the Limestone Jr. Basketball League (The League). I recognize and acknowledge that there are certain risks of physical injury present and I agree to assume full risk of any injuries, including death, damages, or loss, which may be sustained by my child as a result of participation in any and all activities connected with or associated with The League. I agree to waive and relinquish all claims I may have now or in the future as a result of my child's participation in the League against The League, its officers, directors, sponsors, or coaches, and the owner of any facility where games are played including but not limited to any school districts, their boards of education, employees, volunteers or agents. I do hereby fully release and discharge The League, its officers, directors, sponsors, coaches, public schools, their boards of education, employees, volunteers and agents from any and all claims from injuries including death, damage or loss which I may have of which may accrue to me on account of my child's participation in The League. I further agree to indemnify, hold harmless, and defend The League and its officers, directors, sponsors, coaches, public schools, their boards of education, employees, volunteers and agents from any and all claims resulting from injuries, including death, damages, and losses sustained by my child and arising out of, connected with, or in any way associated with the activities of The League. In case of accident or sickness, I consent to emergency care provided by EMT, ambulance or hospital personnel.

Parent / Guardian Name (print)

Parent / Guardian (Signature)

Date

