

WEST MIFFLIN YOUTH BASKETBALL ASSOCIATION 2016-2017 SEASON

NOTE: Players eligible are those who reside in the West Mifflin Borough / Whitaker Borough. Must provide 3 proof of residency at time of sign up.

GENERAL INFORMATION

Youth Name: _____ Birth date: _____
 Father's Name: _____ Grade: _____
 Mother's Name: _____ Gender: _____
 Address: _____ Height: _____
 City: _____ School: _____
 Zip Code: _____ Home Phone: _____
 Cell Phone: _____
 Emergency Contact: _____
 Phone Number: _____

Previous Year Played: _____ Coaches Name: _____

REGISTRATION INFORMATION

League Fees(1/2 Grades) \$70.00
 League Fees(3/12 Grades) \$100.00
 Shirt Fee \$20.00
 Shorts Fee \$20.00
 Discount 2+ Players(Per Child) -\$5.00

Check Appropriate Box

Total Amount Due
Total Amount Paid

Cash _____
Check _____
WMYBA Rep _____

UNIFORM INFORMATION (ALL UNIFORMS ARE ADULT SIZES)						
Shirt Size	S	M	L	XL	XXL	
Short Size	S	M	L	XL	XXL	

Having been informed of the organization of the West Mifflin Youth Basketball Association, to provide supervised basketball game for children, I, the parent/guardian, of the above named candidate do hereby give my approval to their participation in any and all of the activities during the current season. I assume all the risks and hazards incidental to the conduct of the activities, transportation to and from the activities. I further hereby release, absolve, indemnify and hold harmless the West Mifflin Youth Basketball Association, the organizers, sponsors and the supervisors, any and all of them. In case of injury to my child, I hereby waive all claims against the organizers, the sponsors or any of the supervisors appointed by them. I likewise release from responsibility any person transporting my child to or from the activities.

PARENT'S SIGNATURE: _____

You will be asked to volunteer in some capacity.