

# Willington Parks and Recreation 2018-2019 Boys & Girls High School Basketball Information

Registration begins 10/15 for residents and 10/29 for non-residents

## About the League

Boys Teams will consist of players in grades 9-10 (JV) and 11-12 (Varsity)  
Girls Teams will consist of players in grades 9-12

**10 players MAX per team - first come first serve basis.**

Games will begin in December; home games will be played at Hall School on Saturdays and Sundays. Away games could be weekends or weekdays.

Each team will have one practice per week.

## Program Philosophy

It is expected that players will do their best at all times and avoid negative remarks (or gestures) to any player, and act in a sportsmanlike manner always, win or lose. All participants shall treat one another with dignity and respect. Be generous when you lose; be gracious when you win.

### **Fees:**

Resident: \$100.00 per player (if using last year's jersey)  
Resident: \$130.00 if jersey is needed  
Non-Resident: \$110.00 per player (if using last year's jersey)  
Non-Resident: \$140.00 if jersey is needed

Please make checks payable to: WPRD and mail to Willington Parks & Recreation Department, 40 Old Farms Road or drop off at the Parks and Recreation Office during normal business hours.

Willington Parks and Recreation policy is that all children should have the opportunity to participate in sports programs. Registration fees will be reduced due to financial need. If you are experiencing a financial hardship this season, please contact the Director of Parks and Recreation, Maureen Parsell at [mparsell@willingtonct.org](mailto:mparsell@willingtonct.org) or call (860) 487-3108.

Please Print Clearly  
Use a Separate Form for Each Player

## Player Information

Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Allergies, Meds, Other Info: \_\_\_\_\_

If Jersey is needed: **AS AM AL AXL**

Number from last year: \_\_\_\_\_

Are you trying out for an E.O. Team? \_\_\_\_\_

### Primary Household Contact (Parent/Guardian)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_

(Cell) \_\_\_\_\_

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

### Secondary Household Contact (Parent/Guardian)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_

(Cell) \_\_\_\_\_

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

### LOCAL Emergency Contact (Other than parent/guardian, i.e. grandparent, neighbor, etc.)

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

## For Signature

I, the undersigned, by registering myself or my child in the town's programs/trips understand the nature and risks associated with the participation in this activity. I hereby grant my child permission to participate. I am aware that participation is at one's own risk. I acknowledge that the activity, equipment and facilities may pose a risk of personal injury. I am also aware that each participant is responsible for his or her own safety. I hereby waive and release myself, my heirs, executors or administrators of any and all claims and damage we ever had or now have, against the Town of Willington, its successors and assigns, employees, agents and representative for any and all kinds of injury, including but not limited to personal injury and/or property damage suffered by my child, myself, family members or friends while participating in this program. Consent for Medical Treatment of Minors, as the parent or legal guardian of the above named player, I hereby give consent for emergency medical care prescribed by a fully licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well being of my dependent. I certify that the information contained on this form is accurate and complete.

### Player, Parent or Guest Code of Conduct:

Any person who is using alcohol or illicit drugs and/or appears to be intoxicated or under the influence, or who is flagrantly rude, attempts to intimidate, verbally abuse or uses vulgarity or profane language/gestures with an official, coach, or player will be asked to leave the program or game immediately. Any person who commits the above offenses a second time will be banned from any and all programs for a period of one year from the date of the second offense. Any person who physically assaults another player will be immediately removed from program and will be banned for one year from the time of the offense.

Parent/Guardian Name (Please Print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

**Office Use Only:** Check \_\_\_\_\_ Cash (in office only) \_\_\_\_\_ Amount Paid \_\_\_\_\_ Date Paid \_\_\_\_\_