

2011 KETCHIKAN DRIBBLERS LEAGUE REGISTRATION

PO BOX 5942 ~ 2721 7TH AVENUE ~ KETCHIKAN AK 99901

Office (907)225-8133 Fax (907)247-8133

Ketchikandribblers.com

***** REGISTRATION DEADLINE: October 20, 2011 *****

Reg. Fee \$90 1st child \$80(each there after) / All Pee-Wee \$50

*Check here if you did **not** play in Dribbler's last year or you have a new mailing address []

Name: _____ [] M [] F
DOB ___/___/___ Grade:___ Last years Team _____ Division _____

Contact Information: _____ Shirt size (circle) ys ym yl s m l xl

Main Contact Number: _____

Mailing Address: _____

E-Mail: _____

Contact Information (Please specify names, cell, home, work, etc.)	USCG dependant []	Other military dependant []
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Name	Phone #	

Parent/Legal Guardian: _____

Special Considerations/Exceptions: _____

Liability Release: In consideration for allowing my child to participate in the Ketchikan Dribblers League, I do hereby waive, release, and discharge the Ketchikan Dribblers League, it's officers, board members, coaches, referees, players, and successors from liability of any nature whatsoever, arising from or growing out of the participation of my child in any of the activities of KDL. The undersigned parent/legal guardian of the above minor does hereby authorize the officers or coaches of KDL to transport as required said minor to and from KDL sponsored activities including but not limited to athletic and social events.

Consent for Medical Treatment: I hereby give my consent to all medical care prescribed by a duly licensed Doctor of Medicine for my child as his/her parent or legal guardian. This care may be given under whatever conditions are necessary to preserve the life, limb, or well being of my dependent.

Financial Responsibilities: I hereby acknowledge and take full responsibility for the proper care and returning of any and all league sponsored uniforms and equipment. I further acknowledge that I will be financially responsible for the replacement cost of said uniforms/equipment should they not be returned at the end of the season due to loss or damage.

Behavioral Contract: As the parent/legal guardian of the above minor and as a player I have read and do understand the above requirements. Furthermore, I am accepting the KDL challenge to become a positive influence in the community by using good sportsmanship, teamwork, and a healthy lifestyle.

(Players Signature) (Parent/Legal Guardian Signature) Date

***** Please make checks payable to KDL or Ketchikan Dribblers League. *****

FOR OFFICE USE ONLY

Paid By: [] Cash [] Check (Check Number _____) Receipt No: _____

Grade Verified: [] Yes [] No Received By: _____ Date: _____