



# KEARNY RECREATION YOUTH BASKETBALL

## REGISTRATIONS

KEARNY RECREATION DEPARTMENT  
402 KEARNY AVENUE

Monday, October 31, 2022 to Friday, November 18, 2022

Time: 9:00 a.m. to 4:30 p.m. Fee: \$35.00

On-line registrations at: <https://register.communitypass.net/townofkearny>

### **LATE REGISTRATIONS WILL BE PLACED ON WAITING LIST**

Birth certificates and proof of residency is required at the time of registration.

**IMPORTANT ALERT:** Please do not register your child if he/she cannot fulfill the commitment to attend practices and games as their absences may result in their team forfeiting, which is not fair to the other players. And please be advised no special request will be accepted for your child to be placed with a certain team, player or coach. NO REFUNDS ONCE REGISTRATIONS END.

**For further information please contact the Recreation Dept. at 201-955-7983.**

**Please check appropriate box:**  Boys and Girls grade 2  Girls grades 3, 4 & 5  
 Boys grades 3 & 4  Boys Grades 5 & 6  Girls grades 6, 7 & 8  Boys grades 7 & 8

### Kearny Recreation Youth Basketball Activity Registration Form

Name \_\_\_\_\_ Address \_\_\_\_\_ parent email: \_\_\_\_\_

Grade \_\_\_\_\_ School \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell: \_\_\_\_\_

Health Insurance Carrier \_\_\_\_\_ Policy No. \_\_\_\_\_ Shirt size: youth or adult S M L XL  
PLEASE CIRCLE

**Yes, I am interested in Coaching, Assistant Coaching (circle one) –only head coach registration fee is waived**

NAME: \_\_\_\_\_ CONTACT NUMBER: \_\_\_\_\_

Please read and sign below:

I/We the parents of the above named child do hereby give my/our approval to his/her participation in any and all activities. I/We do assume all risks and hazards incidental to the conduct of the activities and transportation to and from the activities: and do further hereby release, absolve, indemnify and hold harmless the Town of Kearny and the organizers, sponsors, and supervisors: any or all of them. In case of injury, to my/our child I/We waived all claims against the organizers, the sponsors, or any of the supervisors appointed by them. I/We likewise release from responsibility any person transporting my/our child to or from the activities. I/we will furnish his/her certified birth certificate upon request.

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

**(Parent or Guardian) Please review reverse side before signing form**

**FOR OFFICE USE ONLY:**

Registered By: \_\_\_\_\_ Date: \_\_\_\_\_ Fee: \_\_\_\_\_ Check/Cash/MO