

**PERRY GIRLS YOUTH  
FALL BASKETBALL LEAGUE – REGISTRATION FORM**

September 18<sup>th</sup> - October 29<sup>th</sup>  
Grades 3<sup>rd</sup> thru 6<sup>th</sup>

- 2 Week Skills Camp – Learning Offensive and Defensive Fundamentals
  - Led by Varsity Staff and Players
- 4 Week Practice and Officiated Game Schedule
- Practice two nights a week
- Games on Sunday afternoon
- Ball, Basketball Journal, Reversible Jersey (if needed)
- \$65.00 Registration Fee
  - Scholarships Available Upon Request



“Building Champions in the Classroom, on the Court and in Society”  
Start Your Journey With Us Today

**Parent Meeting September 14<sup>th</sup> 7PM Edison Cafeteria**

This is a great time to meet our varsity staff and discuss any questions you have about the youth clinic, practice times, games, and travel league. Hope to see you there!

Child’s Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Parent’s Name: \_\_\_\_\_

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

Emails (in order of use): \_\_\_\_\_

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

Grade: \_\_\_\_\_ School (circle): Genoa Knapp Lohr Pfeiffer SJA Watson Whipple Other: \_\_\_\_\_

Jersey size (circle if needed): YS YM YL AS AM AL AXL NA (Have Jersey from last year)

If you would like to help by coaching, please give us your name: \_\_\_\_\_ Contact #: \_\_\_\_\_

Coaching clinic will be provided for all volunteer coaches

Please print clearly, tear off, and return with check for \$65 payable to “Perry Girls Basketball Boosters.”

One registration form per child, please. (\$50.00 for multiple players in same family)

Please mail registrations to: **Perry High School/ 3737 13<sup>th</sup> St. SW/ Massillon, OH 44646**

**ATTN: Athletic Dept./ Girl’s Basketball**

Any questions on registration, the clinic or scholarships can be directed to Lauren Bausch (Youth Coordinator) at (330) 284-7825 or lauren.bausch@aultman.com

RELEASE AND WAIVER: I understand that sports are inherently dangerous activities. I understand that Perry Girls Basketball Boosters, Perry Boys Basketball Boosters, Perry Youth Basketball, and Perry Local Schools (collectively “PYB”) do not claim that the coaches, officials, or other participants have any special expertise and that they are volunteers. I hereby waive any liability on the part of PYB and the participants, coaches, officials, employees, and organizers for any injuries that may result from my child’s participation. I also permit the use of my child’s image in any promotional material that may be made. I specifically authorize PYB and anyone associated with it, as well as all medical and emergency personnel, to treat my child as they deem necessary in case of an emergency. I waive any claim of liability against these individuals or organizations for emergency treatment of my child. I agree to be responsible for any expenses or bills incurred as a result of such treatment.

SIGNATURE OF PARENT OR GUARDIAN: \_\_\_\_\_

In case of emergency call (name and phone): \_\_\_\_\_

Child’s physician and phone: \_\_\_\_\_

Insurance: \_\_\_\_\_

Special conditions / instructions (hospital preference) / medication allergies: \_\_\_\_\_