

VISA or MC_

TEAM Basketball REGISTRATION

WINTER 2021-2022 SEASON REGISTER ONLINE KINGDOMSPORTSCENTER.COM

2nd - 6th Boys + Girls



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SELECT YOUR -GENDERGRADEOPTIONS- AND -DIVISION LEVEL- NO CO-ED TEAMS ALLOWED		
2-6 th High Competitive	2-6 th Low Competitive	2-6 th REC
() Boys () Girls () 2^{nd} () 3^{rd} () 4^{th} () 5^{th} () 6^{th}	() Boys () Girls () 3 rd () 4 th () 5 th (
() \$350 – Practice on your own 10 Game Season (Ref Fees Included) \$250 Value Includes Season Ending Tournament () \$650 – 10 Practices Included 10 Game Season (Ref Fees Included) \$250 Value Includes Season Ending Tournament Start Date: Dec. 4 th – End Date: Feb. 20 th Deadline Nov. 29 th For League	() \$350 – Practice on your own 10 Game Season (Ref Fees Included) \$250 Value Includes Season Ending Tournan () \$650 – 10 Practices Included 10 Game Season (Ref Fees Included) \$250 Value Includes Season Ending Tournan Start Date: Dec. 4 th – End Date: Feb. 20 th Deadline Nov. 29 th For League	() \$650 – 10 Practices Included 10 Game Season (Ref Fees Included) \$250 Value
LEAGUE Game Days/Times	Practice Time/Days	
Sat: 4:30, 5:30, 6:30, 7:30, 8:30	Tues & Thurs: 5:30, 6:30, 7:30, 8:30	
Sun: 10, 11, 12, 1, 2, 3, 4, 5, 6, 7, 8	All Durations and Channel C	ourt 1 hour time clots @ Kingdom
Pre-Season Tournament: November 19-21 Thanksgiving Tournament: November 26-28 Christmas Tournament: Dec. 20-23/26-29,31 MLK Tournament: January 14-16 Season Ending Tournament: Feb 25 - March 6	\$135 - Ref Fees Included 3 game gua \$135 - Ref Fees Included 3 game gua \$175 - Ref Fees Included 3 game gua \$175 - Ref Fees Included 3 game gua Free For All League Teams Single Elimi	arantee locations with a broad level of talent. Tom Sunderman & I, Michael Roe, will work together on both the league and tournaments, to
REG	SISTER ONLINE AT WWW.KINGDOMSPORTSCENT	TER.COM
Team Name:	Team Color: Coach's	s Name:
Email Address:	Cell Ph	one:
KINGDOM SPORTS CENTER WAVIER FOR SPECTATORS AND PARTICIPANTS ATTENENTION: No Player/Team will be able to participate if the Wavier is not signed and dated on the Registration Form. Roster must be turned in s first game. WAIVER/EXCLUSION CLAUSE (please read carefully and sign below) I, the parent/guardian/Coach/participant, spectator, in registering (or watching) for Any Sporting Event within The Kingdom Sports Center, Inc., understand that he/she/l in attending any programs and using the facilities does so at his/her/my own risk. Kingdom Sports Center, Inc., and its/their owners, Sponsors, employees and agents, shall not be liable for any damages whatsoever arising from any personal injury or property loss sustained by participant and his/her/my family in or about any programs on the premises or at the 440 Watkins Glen Location. I acknowledge that I am aware of the risks inherent in participating (and or watching) in Sports such as Basketball, Soccer, Training, or any other purpose, that is a Sports Facility which host events that can require considerable running, starting, stopping and physical exertion; and could potentially lead to limb injuries; possible permanent disability and death. Participants and parents assume full responsibility for all injuries and damages which may occur in or about any programs on the premises and he/she/l do or does hereby fully and forever release, discharge and hold harmless Kingdom Sports Center, Inc., Kingdom Community Foundation and all associated facilities and its/their owners, employees and agents from any and all claims, demands, damages, rights of action, present or future resulting from or arising out of any person's participation in any programs or use of its facilities/locations. In addition, he/she/l agree(s) to the following rules of play and conduct set by Kingdom Sports Center, Inc and located on website and throughout the facility. He/she/l understand(s) that failure to do so may result in		
take their own responsibility regarding the COVID-19 online infe	ormation stating they are aware of the risks they take if beir	· ·
Requests: Must be written on form below by coach at time of registration. Requests may or may not be met.		
For Office Use Only: Amount I	Pd. \$ Amount Owed. \$	Cash Check #

_ Exp. _____ Code #_____ Zip _____

_____ Employee Initials _____ Date