Lyme Parks and Recreation

Winter Basketball League Registration 2014

Basketball Registration can be mailed to The Lyme Town Hall (480 Hamburg Rd. Lyme, CT. 06371) by Wednesday, December 10th. **Please fill out a form for each child**. **In order to make fair teams and to schedule games there will not be any late registrations excepted. Please do not send any registration forms into the school.** Any extra information regarding your child's availability or carpool needs can be added to help us make sure we place your child in the best team available for their needs. It is very difficult to switch teams after they have been made. Your understanding is appreciated in helping us make fair teams and provide your child with an exciting and competitive basketball season.

Due to low numbers we are combining all grades K-8 with Old Lyme. **Lyme residents must register with the Town of Lyme.** The schedules will continue to be Saturday mornings. Teams will be formed as soon as all registrations are in on the deadline.

K – 2nd: Will play by grade level on co-ed teams.

3rd, 4th, and 5th graders: will be separated into non-coed teams. Games will begin in January.

6-8: will form pickup games on Saturdays

Coaches meeting will be Saturday Dec. 13 at the Old Lyme Town Hall.
K,1,2 coaches will meet at 9:00 am. 3-8 coaches will meet at 10:00 am.

Games will begin tentatively January 10 – February 28. Times TBD

Fee - $40. Family Rate - $65

Parent volunteers will be needed to run these activities. Thank you in advance for your participation. Please be sure your child is prepared with proper attire and a bottle of water at every game and practice. Please respect the coaches and other team members by having your child attend all practices and games and by arriving at the scheduled time for all practices and games. Any questions can be directed to Jason and Kristen Thornton at 884-5057 or kristenthornton@aol.com.

Lyme Parks and Rec Winter Basketball League Registration

Mail to, Lyme Town Hall (480 Hamburg RD. Lyme, CT. 06371). **Please do not send into school**.

Childs Name_____

Grade_____ Age_____ Birth date_____

Adress_____

Parent/Guardian_____Email_____

Phone_____(home)_____(work)

Would you like to coach?_____ Assist?_____
Other?_____

In case of emergency, please list the name of a contact person in case the parent cannot be reached:
Name_____Phone_____
Please add any additional information regarding availability and carpooling on the back to help us place your child on the appropriate team.

Do you give permission for simple first aid to be administered to your child?
Yes_____ No_____
Does your child have any medical conditions (I.E. Allergies, Asthma, Bee stings, etc.) that we should be aware of? Yes_____ No_____
If yes, please specify_____
Is your child presently taking any medications? Yes_____ No_____
If yes, please specify_____

In consideration of the acceptance of my child in the Town of Lyme Recreation programs, I, for myself, executors, administrators, and assignees, and my child's executors, administrators, and assignees do hereby release and discharge the Town of Lyme and the Town of Lyme Recreation Commission, their employees, agents, officials, counselors, lifeguards, coaches, and other program personnel from any and all claims arising or growing out of my child's participation in said program. I attest and verify that I have full knowledge of the scope of this program and activities to be conducted in it and that my child is physically fit, sufficiently trained and qualified to participate in various activities.

Parent's Signature_____Date_____

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