



## 2018/2019 Basketball Registration Form

**\*\* Please note \*\***

Lyme Residents must sign-up with Lyme Parks and Recreation.  
Lyme and Old Lyme players will be combined on Teams at the Coaches meeting.  
Mail to Lyme Town Hall – 480 Hamburg RD. Lyme, CT.06371. Do not send into school.

Any Questions call Jason Thornton at 860-884-5048 or email Kristen at kristenthornton@aol.com

Childs Name \_\_\_\_\_

Gender- M\_\_\_\_\_ F\_\_\_\_\_ Grade\_\_\_\_\_ Age\_\_\_\_\_ DOB\_\_\_\_\_

Address\_\_\_\_\_

Parent/Guardian\_\_\_\_\_

Email\_\_\_\_\_

Phone (cell)\_\_\_\_\_ (Home)\_\_\_\_\_

Emergency Contact (other the parent listed) - Name \_\_\_\_\_  
phone\_\_\_\_\_

Does your child have any medical conditions (I.E. Allergies, Asthma, Bee Stings, etc.) Yes\_\_\_\_\_ N\_\_\_\_\_

If yes, Please Specify\_\_\_\_\_

Is your child taking any medications? Yes\_\_\_\_\_ NO\_\_\_\_\_ If Yes Please Specify\_\_\_\_\_

Would you like to coach?\_\_\_\_\_ Assist\_\_\_\_\_ Other\_\_\_\_\_

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

\_\_\_\_\_/ / Initials are required and indicate understanding of the photograph policy maintained by the Town of Lyme Park & Recreation Dept. Your initials serve as a release, allowing you or your child to be photographed during P&R activities and you understand photographs may be used for purposes depicted in the policy.

If you choose to decline any photographs or use, you MUST submit that in writing with each activity that you register.

Office use: Paid\_\_\_\_\_ Unpaid\_\_\_\_\_