



PLAYER APPLICATION

2018-2019 Early ___ Regular ___ Season

In basketball, as well as any physical sport, there is always a risk of injury. This application is accepted with the understanding that, in the event of an injury to the child or damage of the property of the child, any insurance policy of the parent and/or guardian, which covers such injury or loss, shall be the primary source of any recovery, and that the parent and/or guardian shall hold harmless the City of St. Petersburg, as well as North St. Pete Basketball for Youth, Inc., their agents, employees and volunteers, from any liability while the applicant is participating in our program. Parent and/or guardian, please note: a legal parent or guardian must sign this application. Coaches are only responsible for players during games and practices.

Is the child new to the program? Y ___ N ___ In which Division does the child want to play? ___
Have you moved to the city recently? Y ___ N ___ Child age on August 31st, 2018: _____

Child's Last Name First Name M.I. DOB Heigh and Weight

Address City/ State/ ZIP

E-mail Address Home Phone # Cell Phone # Emergency Name/ Phone #

Father's Name Occupation Work Phone #

Mother's Name Occupation Work Phone #

Played last season? (Yes/No) Division Coach's Name

Does applicant have any medical problems, disabilities, or anything the coach should know about?

Any special needs or requests? We cannot promise anything, but we will try to do our best to accomadate it.

Jersey Size

Signature of Parent/ Guardian Date

Amount Paid/ Method

Stay in touch with the League:
<http://www.juniortritons.com/>
www.facebook.com/juniortritons/