

**COSHOCTON YOUTH LEAGUE
FOR BOYS IN GRADES 3 THROUGH 6**

Dates: Practices in October and November will be on Monday's or Wednesdays at Central

Times: Practice and Game times will be announced.

Game Dates: Games will be held on November 5th, 12th, 19th, December 3rd, 10th, and 17th.

All games will be played at Central

Cost: \$10 - The player receives a game T-shirt to keep! Make checks payable to:

COSHOCTON HIGH SCHOOL

Deadline for Registration: Sign ups will be at each elementary from 5:00-6:00 on Thursday, October 20th: LINCOLN = GYM; CENTRAL= 8th street doors SOUTH LAWN= Entry way. Player's from Sacred Heart can sign up at Central or South Lawn. If the cost is a problem let Coach Hilgenberg know at sign up. Any question call 622-9433.

REGISTRATION FORM

I wish to enroll in the Coshocton Youth Basketball League and abide by all the rules and regulations of the league. The director or anyone else connected with the Coshocton Youth Basketball League will not be held responsible for accidents, medical, dental, or any expense incurred as a result of an accident. I hereby assume voluntarily any risk, accident, or injury to myself as a result of participation in this program. Also, I grant the right to administer all medical services that result from participation, including emergency and referral if necessary.

PLEASE TYPE OR PRINT:

EMERGENCY AUTHORIZATION
INFORMATION

PLAYER'S NAME _____

Parents' Name _____

HOME ADDRESS _____

Parents' Home Phone _____

Work Phone _____

MEDICAL INFORMATION:

Are you allergic to any medication? yes / no

Player's Birth Date _____

Are you currently taking medication? yes / no

Elementary School _____

Do you have asthma? yes / no

(Parent/Guardian Signature)

Are You Interested in Coaching? YES/NO

Do you have any medical problems we need to know about? yes / no

Jersey Size: (Adult/Youth) (Circle one)

If yes to any of the above questions, please explain.

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