



VILLAGE OF VALLEY VIEW
 RECREATION DEPARTMENT
 6828 Hathaway Road
 Valley View, Ohio 44125
 (216) 524-9365

2020-2021 Girls and Boys Basketball Registration Form

****PLEASE ALSO COMPLETE COVID-19 WAIVER ON BACK****

LEAGUES ARE FOR GIRLS AND BOYS IN GRADES 3 THROUGH 6 FOR THE 2020-21 SCHOOL YEAR
REGISTRATION CLOSES ON THURSDAY, OCTOBER 15 – (\$25 LATE FEE APPLIES)
THERE IS A \$50 PARTICIPATION FEE FOR NON-VALLEY VIEW RESIDENTS*

*Non-residents are NOT guaranteed a spot on a Valley View team – inclusion will be determined based upon the need for players by age group

Name: _____ Date of Birth: _____

Address: _____ City: _____

Phone: _____ Gender: _____ Grade: _____

Parent/Guardian E-mail Address(es): _____

Please list any conflicts your child may have during the season (i.e. another activity on Mondays, etc):

Shorts & Shirt Sizes

Youth Small	(6-8)		
Youth Medium	(10-12)		
Youth Large	(14)	Shorts: _____	Shirt: _____
Adult Small	(34-36)		
Adult Medium	(38-40)		
Adult Large	(42-44)		

Does child have any physical ailments, such as allergies, heart, etc.? _____

If yes, please explain: _____

Having been informed of the organization of the Valley View Recreation Department to provide supervised youth basketball, I/We the parents of the above named candidate, do hereby give my/our approval of his/her participation in any and all of the activities during the current season. I/We do assume all the risks and hazards incidental to the conduct of the activities, transportation to and from the activities, and I/We do further hereby release, absolve, indemnify and hold harmless the Village of Valley View, the organizers, sponsors, leasers and the supervisors appointed by them. I/We likewise release from responsibility any person transporting my/our child to or from activities.

The Village of Valley View does not provide medical insurance. Do you have hospitalization and/or medical insurance? _____

I have read and understand the above waiver and release:

 Parent/Guardian _____
 Date

 Parent/Guardian _____
 Date

VOLUNTEER COACH REGISTRATION:

NAME _____

Head Coach

Assistant