HOLMDEL YOUTH ACTIVITIES ASSOCIATION
Mail to: POB 49 – Holmdel, NJ 07733

2016 Basketball Registration Form

Youth's Name _____ Today's Date_____
Last First

Address_____Phone_____ Birthdate _____

Grade (2016-2017) _____ Age _____ (Must be 5 by Oct 1) **Player Shirt Size** (circle one)

YOUTH: small medium large

Parent's E-Mail Address_____

ADULT: small medium large x large

Circle One: Boys Basketball Girls Basketball

1. I am personally satisfied as to my youth's fitness to participate in this activity. HYAA strongly recommends that you seek professional medical advice if there is any doubt about your child's fitness to participate in this activity.
2. HYAA does not promote, encourage or guarantee players requests. We try our best to be sensitive to unique individual circumstances. However, with a program that serves over a thousand children, it is not practical or logistically possible to honor every request. If you have a particular concern other than carpool convenience or playing with friends, please discuss with our administrators at the time of registration.
3. **HYAA is a volunteer organization; you must volunteer for one of the assignments below in order for your registration to be complete.**

   Coach** _____ Asst. Coach**_____ League Pres._____ Team Secretary_____Book/Clock_____

   Rutgers Certified _____ Background verification _____

   ****Note Rutgers Training Program and Background Verification are MANDATORY for all coaches and assistant coaches. Courses will be scheduled prior to and during the season.**
4. In emergency situations you should contact:

   Father_____ Mother_____ Cell Phone #_____

   Phone(H/W)_____ Phone(H/W)_____

By attaching my signature hereto, I certify that the above information is true and correct to the best of my knowledge. I further certify that I have read, understand, and agree, on behalf of my entire family, to comply with the HYAA Model Code of Conduct and all HYAA policies.

I understand that while every effort is made by the volunteers to protect the safety of the participants, HYAA assumes no responsibility for any injures or accidents that may occur. Each individual participating is doing so at his or her own risk and by signing this document agrees to release HYAA from any and all liability with respect to any injury or accident which may occur at the facilities.

_____
Parent or Guardian's Signature

FEES: **Association Fee: (2016-2017 Season)** **$25.00 (per family per year)**

Basketball Registration NOTE: **Prior** to October 21, 2016 $100.00

After October 21, 2016 $115.00

Sibling Discount	2nd child	$ -10.00
	3rd+ child	$ -15.00
LATE FEE AFTER	***November 18, 2016***	***$+ 50.00***

TOTAL $_____

Make all checks payable to HYAA ***DO NOT*** return competed form to school

Log on to HYAA.ORG to see what's going on in HYAA and to register

HYAA is not an affiliate of The Holmdel Board of Education