

**Eastern Intramural Basketball Program**

**Entry Form**

**Grades 3-6**

**Please Circle: BOYS                      GIRLS**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**Birthdate:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**School:** \_\_\_\_\_ **Grade Level:** \_\_\_\_\_

**Shirt Size: Yth. Sm. / Yth. Med. / Yth. Large / Adult Small /  
Adult Med. / Adult Large / Adult XL / Adult XXL**

**Cost: \$65 Player will receive a reversible jersey, league play,  
game supplies, basketball, gym use and  
miscellaneous expenses.**

\_\_\_\_\_ **No ball \$5**

\_\_\_\_\_ **No jersey \$10**

\_\_\_\_\_ **multiple family member \$5 off each form**

**Parent's Permission and Waiver Form**

My child has permission to attend the Eastern Intramural Basketball program. I know of no physical impairment that will affect or be affected by the program. I acknowledge that while at the program my child will participate in a sport that may involved among other things, physical contact with other persons or objects (including the ground) and may incur the risk of injury. I specifically waive and release the Warrior Basketball Program, its employees and staff from liability for any claims for damages, which my child may have for injuries he or she may sustain at the sessions.

**Signature of Parent or Guardian:** \_\_\_\_\_

**Date:** \_\_\_\_\_

\_\_\_\_\_ **Coaching Preference – please call and let us  
know.**

\_\_\_\_\_ **I AM INTERESTED IN COACHING A GRADE LEVEL TEAM IN THE  
LEAGUE.**