



### After-School Basketball Skills Training Program

## STUDENT REGISTRATION FORM

Brooks Basketball Academy welcomes your child to participate in our Basketball Skills Training Program for the 2019-2020 school year!

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### PLEASE COMPLETE THE FORM BELOW IN ITS ENTIRETY

You can complete and submit this form to us through email or regular mail (see addresses below). You can also register your child directly through our website at: [www.BrooksBasketballAcademy.com/bba-registration](http://www.BrooksBasketballAcademy.com/bba-registration)

Name of Participant:

Gender:

Date of Birth (Month/Day/Year):

Name of School:

School District:

Grade in School:

Participant Level of Experience (Beginner/Intermediate/Advanced):

Participant T-Shirt Size:	Youth 6-8	Youth 10-12	Youth 14-16	Youth 18-20
	Adult S	Adult M	Adult L	Adult XL

Name of Parent or Guardian:

Parent/Guardian Contact:	Phone	Email
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Name of Emergency Contact:

Emergency Contact Info:	Phone	Email
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### Medical Liability Release and Media Release Agreement

I, the Parent/Guardian of the registrant, a minor, understand that not all risks associated with sports can be avoided, therefore, I release Brooks Basketball Academy from responsibility for any injury that my child might incur during the course of normal play. I agree to also indemnify and hold harmless the volunteers, employees, and owners of the organization. I further understand that in the event of a medical emergency, Brooks Basketball Academy will call EMS to render assistance and that I will be financially responsible for any expenses involved.

I also grant permission to Brooks Basketball Academy to use the above-named minor's image, likeness, or voice recording on the Brooks Basketball Academy website or in any other official Brooks Basketball Academy publication without further notice or compensation.

**Signature of Parent/Guardian:**

**Date:**