

ROCKPORT RECREATION COMMITTEE
REGISTRATION FORM
Youth Basketball

All children in grades 3rd, 4th, 5th, and 6th are eligible to participate in the 2016 Youth Basketball Program.

The program will take place on Fridays and Saturdays beginning November 11th and continuing to February 11th. This a 10 week session with breaks in the holiday weeks. The fee is 75.00. There are scholarships available. Make checks or money orders payable to the **“Town of Rockport”**. Return to Rockport Recreation Department, 37 Broadway Street Rockport, MA 01966

Name _____

Age _____

Shirt Size: **Adult:** S M LG XL **Youth:** M LG

Grade _____

Address _____

Phone _____

Email Address _____

Parent/Guardian Name _____

I give my child permission to participate in the Rockport Youth Basketball Program. I free the Town of Rockport from any liability in case of injury.

Parent/Guardian Signature

Date

I give my child permission to be photographed for the town web site. No names will be used.

Parent/Guardian Signature

Date