

**NORTH READING YOUTH BASKETBALL
PLAYER REGISTRATION FORM**

NAME _____
ADDRESS _____
PHONE _____ MALE _____ FEMALE _____
BIRTH DATE _____ GRADE _____
E-MAIL ADDRESS _____

As parent, guardian, or responsible person for the applicant, I authorize membership in the *North Reading Youth Basketball* program. I also understand that the coaches, assistants, association officers, or any persons connected with the program are freed from any and all liability while the applicant is engaged in basketball activity or other purposes of this program. I recognize that the program carries limited insurance and it is the responsibility of each individual for any coverage.

SIGNATURE OF PARENT/GUARDIAN

DATE

REGISTRATION FEE:

- A fee of \$65 is required for each 2nd grade applicant. The town user fee is included in this amount.
- A fee of \$85 is required for each older applicant. The school user fee is included in this amount.
- An additional \$85 is required for any applicant accepted on a traveling team.
- The maximum fee per family is \$275. For families only involved in the in-town program, the maximum fee is \$185.
- A late fee of \$10 per applicant will be assessed.

CHECK IF YOU ARE ABLE TO COACH _____

Please make checks payable to N.R.Y.B.

PLEASE MAIL THIS FORM AND CHECK TO:

Larry Dysart
40 Anthony Road
North Reading, MA 01864

Rev. 9/09