Anderson County Park & Recreation Department

2024-25 Youth Basketball League

Registration Form

Mark Bryant Director Email – [markacpark@gmail.com](mailto:markacpark@gmail.com)

Park Website – acpark.ky.gov

Participant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents/Guardians Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Phone Numbers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age as of November 1, 2024: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade: 2 3 4 5 Number of years played: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Shirt Size: ( Circle one ) Youth: S M L XL Adult Size: ( Circle one ) S M L XL XXL

Siblings in the same age division: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**In consideration of the acceptance of my child’s registration, I, my executors, administrations, and assignees do hereby release and discharge the Anderson County Recreation Department, their employees, all coaches, and associates for all claims of damage, demands, actions and injuries that might occur during participation ( practice and or games ) in this program.**

**I/We assume all risks and hazards incidental to such participation including transportation to and from related activities. I further authorize the Anderson County Recreation Department, their coaches, and officials to obtain medical attention or medication for my child in the case of an emergency when a parent or guardian cannot be contacted.**

**I realize that my child may be suspended or dismissed from the program at any time as a disciplinary measure for unacceptable behavior or damage to property, as determined by the coaches, the Director, or Recreation Committee.**

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

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

**Amount Paid:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cash:\_\_\_\_\_\_ Receipt#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check#\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**League Information**

RegistrationDates: October 7 – October 18th.

Evaluations- October 21st and 22nd

Practice begins: November 4th

**Cost - $50 per player**

**Practice: teams will practice 2 times per week.**

**Games: Games will be played on Saturday’s , site and times will be determined.**

**Siblings will be placed on same team given they fall into the same grade level.**

**Team Breakdown – 2nd & 3rd 4th & 5th.**

**Registration Forms may be mailed to: Anderson Co Parks & Rec Department**

**1026 County Park Rd**

**Lawrenceburg, KY 40342**

**Or they may be dropped off at Recreation Department Office.**

**League fee must be submitted with registration form.**