

# 2018-2019 Tri-City Basketball League

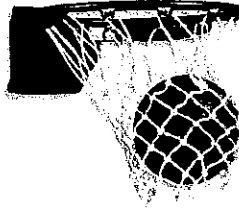
Deadline Wednesday, November 21, 2018

## 3 on 3 Basketball League

2nd & 3rd Grade Division

Boys & Girls

The 3-on-3 youth basketball program is designed to develop individual skills and basic fundamentals of the game, but in a team setting by placing fewer players on the court at one time. Games begin mid January.



## 5 on 5 Basketball League

4th, 5th & 6th Grade Division

Boys & Girls

The 5 on 5 youth basketball program is designed to develop individual skills and basic fundamentals of the game. Games begin mid January.

- **Games:** 3 on 3 are played at East Alton Keasler Complex; 5 on 5 are played at Roxana Community Gym. Games will be played on week nights & Saturdays. \*No team registrations.
- **Free Throw Competition:** Each participant receives 5 free throws prior to each of their regular scheduled games. Awards will be given to 1st and 2nd place winners in their league:
- **Includes:** 10 game schedule, free throw competition, shoot-out and league shirts

**Fee:** \$40 (A \$5 late fee will be added after the deadline; Wednesday November 21, 2018)

**Register at:** Roxana Park #2 Park Drive, Roxana, IL 62084

Register online at [signupville.com/roxana](http://signupville.com/roxana) More information call (618) 254-7485

- Tired of paper forms? Sign up online at [signupville.com/roxana](http://signupville.com/roxana)

The success of our programs is dependent upon Volunteer Coaches:

Would you be a(n): Coach  Yes  No Assistant  Yes  No

Mandatory for all coaches & assistants to fill out a coaches background check. This is for the safety of our children.

Circle t-shirt	Youth Size: YS(6-8)	YM(10-12)	YL(14-16)	Adult Size: AS	AM	AL	AXL
DIVISION _____		DID YOU PLAY LAST YEAR? IF YES, WHICH TEAM _____					
<b>The Tri-City Agencies are responsible for determining which roster a child is placed on, not Coaches or Parents!</b>							
CHILD'S NAME _____			M / F	Height _____			
ADDRESS _____				PHONE _____			
SCHOOL ATTENDING _____			GRADE _____	D.O.B. _____ / _____ / _____	AGE _____		
EMAIL ADDRESS _____							
ANY MEDICAL CONDITIONS? _____							
EMERGENCY CONTACT _____		PHONE _____	RELATION _____				

I, the undersigned parent or legal guardian of the above named child, do agree to abide by the Parents Code of Ethics. I do hereby consent and agree that the above named minor may participate in the Tri-City/Bi-City or Wood River Recreation Program. I understand and acknowledge that there are certain risks of physical injury associated with my child's participation in the above named program which may occur through no fault of any volunteer, participant, employee, or officer of the Tri-City Recreation League, Bi-City Recreation League, Wood River Recreation, the City of Wood River, and/or any other sponsor or party. Photos taken at event could be used for advertisement. If you do not want your child's photo posted please let the staff know.



Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

**OFFICE USE ONLY:** DATE: \_\_\_\_\_ AMOUNT PAID \_\_\_\_\_ RECEIVED BY \_\_\_\_\_

**NO REFUNDS**