

# LPAA Basketball

## Registration

### Girls and Boys Grades 3 through 6



#### Registration Dates and Times

Where: Pottsgrove Middle School – Upper Lobby

Saturday October 7<sup>th</sup> 9:30 AM to 11:30 AM

Wednesday October 11<sup>th</sup> 6:30 PM to 8:30 PM

#### Registration Fees: \$50.00

\$15 late fee per player for registrations post marked after October 30<sup>th</sup>. Cash or Checks accepted. Please make checks payable to LPAA. Payment and forms can be mailed to LPAA Basketball, 2019 Deer Ridge Drive, Pottstown, PA 19464

**Players will not be able to participate in practices or games until full payment is received.**

#### Grades 3<sup>rd</sup> through 6<sup>th</sup>

Group Skills Saturday Nov 4<sup>th</sup> and Draft Day will be held on Saturday Nov 11<sup>th</sup>. All times listed below.

Team practices will begin in December; Games will begin on Jan 6<sup>th</sup> and continue into March at the Pottsgrove Middle School

November 4<sup>th</sup> – Group Skills and Fundamentals / November 11<sup>th</sup> – Player Draft, Team Selection

Boys Grades 5 & 6 9:00am – 10:30am

Boys Grades 3 & 4 10:45am – 12:15pm

Girls Grades 3 & 4 12:30pm – 1:45pm

Girls Grades 5 & 6 1:45pm – 3:00pm

#### Volunteers Needed

Coaches are needed at all grade levels. Please see the coach's volunteer form on our web page at [www.LPAAbasketball.com](http://www.LPAAbasketball.com). This year coaches (Both head and assistants) will be required to obtain:

PA criminal history check (<https://epatch.state.pa.us/>) and

Child Abuse Clearance (<https://www.compass.state.pa.us/cwis/public/home>)

To print out at a registration form and for mail in registration instructions and address, go to [www.LPAAbasketball.com](http://www.LPAAbasketball.com). All updates and weather alerts will be post here and on our Facebook page.

# LPAA BASKETBALL

## Girls and Boys Grades 3 through 6

\$50 Registration Fee

Player's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Address \_\_\_\_\_

Sex: M \_\_\_ F \_\_\_ School you attend: \_\_\_\_\_

Jersey Size: YL \_\_\_ AS \_\_\_ AM \_\_\_ AL \_\_\_ AXL \_\_\_

Significant Past Illness or Injury: \_\_\_\_\_

Guardian Name: \_\_\_\_\_

Guardian Phone: H: \_\_\_\_\_ C: \_\_\_\_\_

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

Guardian Name: \_\_\_\_\_

Guardian Phone: H: \_\_\_\_\_ C: \_\_\_\_\_

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

### LOWER POTTS GROVE ATHLETIC ASSOCIATION RELEASE STATEMENT

**NOTE: The Statement must be signed by parent/guardian for minor player; coach for himself or herself; and administrator for himself or herself**

I, the parent/guardian of the registrant, a minor, agree that the registrant and I will abide by the rules of LPAA, its affiliated organizations and sponsors.

Recognizing the possibility of physical injury associated with basketball and in consideration for the Lower Pottsgrove Athletic association (LPAA) accepting the registrant for its basketball programs and activities (the "Programs"), I hereby release, discharge and/or otherwise indemnify LPAA, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of basketball courts and facilities used for the Program, against any claim by or on behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize.

Player Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

**For more information about LPAA basketball go to: [www.LPAAbasketball.com](http://www.LPAAbasketball.com) or follow us on twitter at [twitter.com/LPAABasketball](https://twitter.com/LPAABasketball)**

Official Use: Date Reg: \_\_\_\_\_ Cash \_\_\_ Check No. \_\_\_\_\_ Amt Paid: \_\_\_\_\_