

BOGOTA RECREATION

2023-2024 BASKETBALL REGISTRATION FORM

PROGRAM: Basketball 2023-2024

NAME OF PARTICIPANT _____ M ___ F ___

ADDRESS _____ TOWN _____

SCHOOL _____ GRADE _____ D/O/B _____

Child's Shirt Size (Circle ONE Please): Youth XS YS YM YL Adult S AS AM AL AXL

NAME OF PARENT/GUARDIAN _____

ADDRESS _____ TOWN _____

PHONE (H) _____ (W) _____ (C) _____

E-MAIL ADDRESS _____

EMERGENCY CONTACT _____ PHONE _____

PHYSICIAN _____

MEDICAL CONSIDERATIONS _____

THE RECREATION COMMISSION RECOMMENDS THAT ALL PARTICIPANTS HAVE AN ANNUAL PHYSICAL.

MEDICAL RELEASE: In case of an emergency during which I cannot be contacted, I give permission to administer emergency treatment as required. YES ___ NO ___

The Bogota Recreation Commission (BRC) has purchased excess accident insurance through Bollinger Insurance Company. This coverage is on an "EXCESS" basis, over and above your primary hospitalization and has a \$50 deductible per incident. However, this policy does not pay all monies unpaid by your carrier. It pays accordingly, based on a schedule of usual and customary charges for our area. Therefore, you may experience some out-of-pocket expenses which WILL NOT be reimbursable by the BRC or the Borough of Bogota.

This coverage will only cover the player while they are participating in an AUTHORIZED practice or game. Once the player has been dismissed, the BRC is no longer liable. The BRC is also not liable for any incident occurring if the player is just "hanging out" at the fields. It is the parent's or guardian's responsibility to get the player to and from a practice or game.

All accidents should be reported IMMEDIATELY to the Coach/Instructor. A Claim Form is to be completed by the parents and program administrator within 24 hours. All incidents are then to be reported to the Recreation Director. Claim forms are available at the Recreation Center Office.

SIGNATURE PARENT/GUARDIAN _____ DATE _____

I would like to coach or help run the Program (print name & number) _____