

ONLINE PLAYER REGISTRATION FORM

Registration is not complete until this form, full payment, and a copy of the player's birth certificate is turned into the Club. Call (361)664-2282 for info.

BGCA OFFICE USE ONLY	<input type="checkbox"/> Cash	<input type="checkbox"/> CK # _____
	Date _____	\$ _____
	Rcpt # _____	Staff _____
	Computer <input type="checkbox"/>	Staff _____

AGE/DEADLINE/FEEES: Check the specific sports page for current registration info.

SPORT/DIVISION? **BASKETBALL** - K/1st 2nd 3rd/4th G
 3rd/4th B 5th/6th G 5th/6th B
 SOCCER - K/1st 2nd/3rd 4th/5th 6th - 8th
 T-BALL - 4/5 yrs T-Ball 6/7 yrs Coach-Pitch B 6-8 yrs Coach-Pitch G
 PEE-WEE BASEBALL (7-9 yrs) **VOLLEYBALL** - 3rd/4th G 5th/6th G

Player's Name	Gender	Birth Date	Age
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Mailing Address	City	Zip Code	Home Phone Number
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School	Grade	List any medical conditions the player may have: _____
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Mother's/ Guardian's Contact Information: Name _____ Employer _____ Contact # _____	Father's/ Guardian's Contact Information: Name _____ Employer _____ Contact # _____	Player Experience (YRS) <input type="checkbox"/> NONE <input type="checkbox"/> 1 SEASON <input type="checkbox"/> 2+ SEASONS
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Additional Contact Name	Relation to Player	Phone Number
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We ask for active participation from all of our parents. Check the box(es) you may be willing to help:

Head Coach Asst. Coach Team Sponsor (\$200) Team Parent \$5.00 Donation

PLAYER SHIRT SIZE: YXS YS YM YL AS AM AL AXL 

SHORT SIZE (SOCCER): YXS YS YM YL AS AM AL AXL

If the player wishes to request a team or coach, indicate below. Indicating a preference **DOES NOT GUARANTEE** a spot. If a team preference is not indicated BGCA will randomly choose a team. If you would like your child to play on the same team as his/her cousin, brother/sister, friend, etc., please indicate in the blank to the right. **NO GUARANTEE!** Some sports require a player draft.

TEAM/COACH PREFERENCE: _____ PLAYER: _____

Waiver of Liability:

I (the participant), in consideration of my participation in the Boys & Girls Club of Alice athletic program, hereby grant BGCA the right to record, broadcast, and otherwise exploit in any and all media, throughout the world my performance in the BGCA athletic program and to use my name, likeness, voice and biographical information concerning me in connection therewith. I assume all risks associated with my participation in the BGCA athletic program and on behalf of myself, and my heirs, executors and administrators in consideration of my participation in the BGCA program. I hereby waive all claims against and release and hold harmless the BGCA. The sponsors of BGCA, including, but not limited to, Alice Chevrolet, and the host municipalities and their respective officers, employees, agents, attorney, successors, and assigns, from and against any and all claims, damages, liabilities, causes of action, losses, costs and expenses, including reasonable attorney's fees, arising out of or in connection with my participation in the BGCA program, including any death, personal injuries or loss of, damage or loss of use of property which may be the result of negligence of wrongful conduction on the part of BGCA, and/or a sponsor and/or the host. I warrant that I am of legal age and that I have read and fully understand the foregoing terms.

 PRINT Parent's / Guardian's Name Parent's / Guardian's Signature Date