



2019-2020 BASKETBALL REGISTRATION

ALL PLAYERS WILL ENJOY:

- Team uniforms, individual and team photographs
- Equal playing time for all players
- Individual awards
- One practice per week, starting in early November
- Games from mid-November to the end of January
- Positive coaching by trained coaches who care
- Weekly after-game huddle times to teach your child character and spiritual values
- Co-ed leagues for boys and girls, from Kindergarten through 6th grade

COST:

Early Registration by October 10: \$85 for first player
\$65 for second sibling
Registration after October 10: \$95 for first player
\$75 for second sibling

= FINAL REGISTRATION DEADLINE IS OCTOBER 31 =

Make checks payable to: Anaheim Church of the Nazarene.
Mail or bring registration and payment to:

Anaheim Church of the Nazarene
1340 North Candlewood Street
Anaheim, CA 92805

QUESTIONS? Call: 714/635-1331 or
Email: candlewoodsports@a1naz.com

New Player Returning Player Male Female DOB (mm/dd/yy) ____/____/____ Grade: _____ Age: _____

Last Name _____ First Name _____ Middle Initial _____ Shirt/Short Size ____/____

School _____ Church (if attend regularly) _____

Address _____ City _____ Zip _____

Phone number Home Cell _____ Email _____@_____

Has your child ever played organized basketball? Yes No If yes, where and how many years? _____

Father/Guardian Name _____

Best contact phone number _____

I will volunteer to do the following for my child's team:

Coach Assistant Coach Team Parent

Mother/Guardian Name _____

Best contact phone number _____

I will volunteer to do the following for my child's team:

Coach Assistant Coach Team Parent

PLEASE READ CAREFULLY – RELEASE MUST BE SIGNED: Does this child have any disabilities, present injuries or limitations, allergies or blood disorders, history of respiratory illness or any other significant medical conditions?

Yes No If yes, please indicate here: _____

If you wish to have your family doctor contacted in case of emergency, please indicate:

Doctor's Name _____ Doctor's Phone Number _____

EMERGENCY AUTHORIZATION: I, the undersigned parent or legal guardian of the participant, a minor, hereby authorize the coaches, assistant coaches or parents of team members acting in the capacity of activity supervisors as my Agents, to consent to medical, surgical or dental examination and/or treatment. In case of emergency, I hereby authorize treatment and/or care at any hospital. If I cannot be reached, please contact:

Full Name _____ Phone _____ Relationship to you _____

Waiver of Liability and Disclaimer: I, the undersigned parent or guardian of the above-named participant, a minor, acknowledge that participation in athletic events necessarily involves risk of physical injury. I further acknowledge that the programs of the Candlewood Sports program are primarily administered by parents who volunteer their time, rather than paid professionals. In consideration for accepting the registration of the above-named individual and permitting the voluntary participation of said individual in its programs, I hereby release, discharge, and hold harmless the Candlewood Sports program, its employees, volunteers, and other representatives from any claims arising out of or relating to physical injury that may result to said individual while participating in the Candlewood Sports-sponsored events, including any physical injury caused by the negligence of any official, referee, or coach while performing his/her duties during any practices or games. I acknowledge that Candlewood Sports may compile and use addresses and photographs of the named individual. I consent to such uses and hereby waive all rights to compensation.

Signature of Parent or Guardian _____ Date _____

CANDLEWOOD SPORTS IS A MINISTRY OF ANAHEIM FIRST CHURCH OF THE NAZARENE. IT IS NOT AN ANAHEIM ELEMENTARY SCHOOL DISTRICT SPONSORED EVENT, NOR WAS THE FLYER PREPARED AS AN ANAHEIM ELEMENTARY SCHOOL DISTRICT EXPENSE.

For office use only: Paid \$ _____ Cash Check # _____
 VBS Received by: _____ Date _____

Minor Waiver/Release

RELEASE OF LIABILITY FOR MINOR PARTICIPANTS. PLEASE READ BEFORE SIGNING

IN CONSIDERATION OF CANDLEWOOD SPORTS, A MINISTRY OF ANAHEIM FIRST CHURCH OF THE NAZARENE, providing a sports league for young children, which includes my child/ward, _____ being allowed to participate in any way in the Basketball-related events and activities, the undersigned acknowledges, appreciates, and agrees that:

The risk of injury to my child from the activities involved in these programs is significant, including the potential for accidents which could cause permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,

1. FOR MYSELF, SPOUSE, AND CHILD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation; and,
2. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from the participation and bring such attention of the nearest official and or instructor immediately; and,
3. I myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS ANAHEIM FIRST CHURCH OF THE NAZARENE; its directors, officers, officials, agents, employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my child's involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
4. I, for myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PARENT/GUARDIAN SIGNATURE

PRINT NAME

DATE

PARENT/GUARDIAN SIGNATURE

PRINT NAME

DATE

UNDERSTANDING OF RISK

My parents/guardians have explained and I understand the seriousness of the risks involved in participating in this program, my personal responsibilities for adhering to rules and regulation, and accept them as a participant.

PARTICIPANT SIGNATURE

PRINT NAME

DATE