

Date Paid:

Douglas County Parks & Recreation

2024 Boys/Girls/Coed Youth Basketball

Youth & Teen Basketball teaches the fundamentals of basketball, good sportsmanship, and teamwork in a fun and competitive way. Participants will be assigned to a team through a draft system.

The season runs from 1/2/24-3/29/24

Registration: 10/16, 10/30, 11/4, 11/18, 11/20, 12/2, 12/11 (Enrollment based on number of volunteer coaches)

Game Location: Douglas County Community Center

Early Birds!		Regular Registration
Divisions 10	/16, 10/30, 11/4, 11/18, 11/20	<u>12/2, 12/11</u>
D2-3 ^d /4 th grade	\$90.00	\$100.00
D3-5 th /6 th grade	\$90.00	\$100.00
D4-7 th /8 th grade	\$90.00	\$100.00
D5-9-12th grade	\$90.00	\$100.00

Participants based on number of volunteer Head Coaches (Max 10 players per team). Register Early-Space is Limited

All Leagues will play at the Douglas County
Community Center.
Schedules to be announced

This program is continually looking for volunteer coaches.

There is a limit of two coaches (Head and Assistant) per team.

Three coaches allowed with coordinator and league-voted approval. Please fill out the following if you are interested in coaching.

Thank you for volunteering!

Head	Coach

Name:
Email:
Phone:
Assistant Coach
Name:
Email:
Phone: All Coach Applications & Background Check Packets must be received/completed by November 22nd, 2023
Vou can pickup and fill it out at the community center

You can pickup and fill it out at the community center Please contact Nick Lonnegren or Liz Begovich for more information.
775-782-5500

Date Waitlisted:

Child's Name	DOB		
Parent's Name			
Mailing Address		City	St Zip
Child's Schooll	DivisionAge (as of today)	Gender Grade	eYears Exp
tend will	to attend the pre-draft player previe be selected via a draft process. Thos was ackground Check Packet n	se who do not attend will be rai	ndomly selected.
	ease print clearly)		
	ntacted by coach when drafted:		Division 5 (9-12th grade) Gameday: Fridays Game Times: TBD Player Preview: 12/16TBD

For more information,

Online at Douglas County Sports Programs or Douglas County Parks & Recreation 775-782-5500 x1

AGREEMENT, WAIVER AND RELEASE Does your child have any pre-existing medical conditions that might limit participation and that the department and coach should be made aware of?				
Does your child have any pre-existing medical cond	itions that might limit participation and that the departmen	nt and coach should be made aware of?		
In consideration for being permitted by Douglas County to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for person injury, death or property damage which I may have, or which may hereafter accrue to me, as a result of participation in the activity. This release is intended to discharge advance the County (its officers, employees, and agents) from any and all liability arising out of or connected in any way with my participation in the activity, even though th liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk at danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs are assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of the minor is physically able to participate in the activity. PARENTAL CONSENT I hereby consent that my son/daughter participate in the above activity, and I execute the above Agreement, Waiver and Release on his/her behalf. I state the minor is physically able to participate in the activity. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any los liability, damage, cost or expense which they may incur as a result of the death or injury or property damage that the minor may sustain while participating in the activity.				
I HAVE CAREFULLY READ THE AGREEMEN AWARE THAT THIS IS A RELEASE OF LIABILITY	T, WAIVER AND RELEASE SET FORTH ON THIS I TY AND A CONTRACT BETWEEN MYSELF AND TH	PAGE AND FULLY UNDERSTAND ITS CONTENTS. I AM E COUNTY AND I SIGN IT OF MY OWN FREE WILL.		
Signature	Date			
In case of emergency and no one can be reached at the	he above address and telephone, please notify:			
NamePhon	CONSENT TO TREATMENT OF MINOR			
representatives, agents or assignees, when neither th	which may occur while the minor is engaged in an activ	Recreation and their econtacted, I hereby give the consent for emergency treatment as		
I UNDERSTAND THAT THE DOUGLAS COUN' AND WILL ADHERE TO ALL OF ITS RULES AN		NOT PROVIDE MEDICAL INSURANCE ON THIS ACTIVITY		
Signature	Date			
FAMILY PHYSICIAN	Phone			
Medical Insurance Carrier				
	Photo Advertising Release Form			
	epartment may desire to use a picture of your child captured during ures, flyers and web postings. Please complete the photo advertisin	DCPR Sports activities and other DCPR programs. These pictures will be ag release form if you give permission for use of such photos.		
cknowledge that only DCPRD is authorized to use the image	(s). I am not giving my authorization for use of any image by any of	urposes for press releases, brochures, flyers and/or any other publication, I other individual or organization. I understand that I may revoke this authorid its officers from any legal responsibility or liability for disclosure of the		
Printed name of parent/guardian	Signature	Date		
Preamble:	Youth Sports Code of Conduct &	Ethics		
Interscholastic and youth sports programs play an in coaches, officials, and administrators to encourage y	nportant role in promoting the physical, social, and emotic youth participants to embrace the values of good sportsmark kample by demonstrating fairness, respect and self-control.	onal development of children. It is therefore essential for parents, nship. Moreover, adults involved in youth sports events should be.		
	nd actions while attending, coaching, officiating or partici and shall conform my behavior to the following code of co	pating in a youth sports event and I will provide support, care and onduct:		
 I will encourage good sportsmanship by demonstrating positive supports for all players, coaches, and officials at every game, practice or other sports events. I will not engage in nor encourage any behavior, which would endanger the health, safety or well being of any coach, parent, participant, official or any other attendee. I will place the emotional, physical and social well being of the participants ahead of any personal desire for victory. I will place the emotional, physical and social well being of the participants and a far individual, remembering the large range of emotional, physical and social development for the same age group. I will support all participants, coaches, officials and administrators working with all participants, in order to encourage a positive and enjoyable experience for all. I will behave in a manner acceptable to community standards and not engage in nor encourage the use of profanity or any threats of verbal or physical violence directed towards any participants, coaches, officials or any other attendees, as well as administrators. I will provide and demand a safe and healthy sports environment that is free from drugs, tobacco and alcohol and require that the participants, coaches, officials spectators and administrators refrain from use at all youth sports events. I will ask my child and all other participants to treat other participants, coaches, officials, spectators and administrator with respect regardless of race, sex, creed color, national origin, sexual orientation or ability. I will do my best to make youth sports fun for all participants and remember that the game is for youth – not adults. I will do my best to make youth sports fun for all participants and remember that the game is for youth – not adults. I will do my best to make youth sports event since the foregoing while attending, coaching, officiating or participating in				
Parent's Signature	Parent's Name	Date:		