

MAYAA BASKETBALL PROGRAM FOR 1ST THRU 6TH GRADE BOYS AND GIRLS  
2021 - 2022  
BASKETBALL REGISTRATION FORM  
[www.mayaabasketball.com](http://www.mayaabasketball.com)

Name: \_\_\_\_\_  
Last First MI

Address: \_\_\_\_\_ Town: \_\_\_\_\_

Phone: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Height: \_\_\_\_\_ Sex: \_\_\_\_\_

Shirt size: Adult: Sm \_\_\_ Med \_\_\_ Lg \_\_\_ XL \_\_\_ 2X \_\_\_  
or  
Youth: Sm \_\_\_ Med \_\_\_ Lg \_\_\_ XL \_\_\_

Vaccination Status: Fully Vaccinated Partially Vaccinated Not Vaccinated

**Basketball Participation Permission Statement**

I, the parent/guardian give our permission for the above registrant to participate in the MAYAA Basketball Program, realizing that such activity involves the potential for injury which is inherent in all sports. I acknowledge that even with the best coaching, use of the most advanced protective equipment and strict observance of rules, injuries are still a possibility. On rare occasions these injuries can be so severe as to result in total paralysis or even death. I hereby release, discharge and/or otherwise indemnify MAYAA Basketball, Team Sponsor, Coaches and all associate personnel, including the owners of fields and facilities utilized for the program, against any claim by or on behalf of the registrant as the result of the registrant's participation in the Program.

**CONSENT FOR MEDICAL TREATMENT ( MINOR )**

As the parent or legal guardian of the above named player, I hereby give my consent for emergency medical care as prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.

I have read and understand the above conditions and agree to abide by them.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

**PARTICIPATION FEE - \$50 PER CHILD OR \$80 PER FAMILY (if one or more children from a family will be playing)**

The participation fee is a mandatory fee that helps MAYAA to cover its cost for mandatory insurance and the purchase of equipment. A child will not be issued a uniform or allowed to participate in any practices or games until the participation fee has been taken care of. If there is a financial hardship concerning this fee, please feel free to contact a board member as it is MAYAA's policy not to deny any youth the opportunity to participate because of financial constraints. Any financial arrangements will be kept confidential.

Dear Parents,

Thank you for giving your son/daughter the opportunity to participate in the MAYAA basketball program. We want the games to be an enjoyable, competitive and fun experience for the players, coaches and fans. To accomplish this task, we would like to have some background information about your son or daughter's level of ability. Our goal is to create fair and equitable teams!

We understand that players from last year's teams might expect to play for the same team. We will do our best to honor those requests, but we hope you understand our philosophy of creating even handed and equitable teams that will compete fairly and competitively.

Please read and fill out the survey below.

Son/daughter years of basketball experience 0 1 2 3 4 5 years

Basketball camps your son/daughter has participated in 0 1-3 4-6 7-10 camps

Son/daughter desire to play: anxious not sure somewhat interested very interested

How does your son/daughter feel about their ability: beginner in between expert

Please understand that our goal is to have important information that will assist us in making sure that every team is balanced and players learn the idea of promoting a sense of team and good sportsmanship.

Please list any health concerns you have about your child: \_\_\_\_\_

**If you would like to assist in any way, please check below:**

**Head Coach \_\_\_\_\_ Asst. Coach \_\_\_\_\_ Referee \_\_\_\_\_ Clock Keeper \_\_\_\_\_**