



MEN'S BASKETBALL LEAGUE

TEAM ENTRY FORM

ENTRY FEE \$350

(\$35 per team member)

Deadline March 19, 2010

For additional information, please contact

Jeff Owens at (870) 933-4604

OR email – jowens@jonesboro.org

OR visit our website – www.jonesborosports.org

TEAM NAME*: _____

TEAM JERSEY COLOR*: *(PLEASE LIST IN ORDER OF PREFERENCE)*

1.) _____

2.) _____

3.) _____

*TEAM NAMES AND JERSEY COLORS WILL BE ON A FIRST COME, FIRST SERVE BASIS.

INDIVIDUAL MEMBER INFORMATION

NAME: _____ ADDRESS: _____
CITY, STATE, ZIP: _____ PHONE: _____
EMERGENCY NAME: _____ EMERGENCY PHONE: _____
EMAIL: _____ SEX: _____ AGE: _____ DOB: _____

RELEASE AND WAIVER OF LIABILITY

I, the registrant, agree that I will abide by the rules of the Jonesboro Men's Basketball League, its affiliated organizations, and sponsors. Recognizing the possibilities of physical injury associated with participation in athletic activities and in consideration for the Jonesboro Men's Basketball League accepting the registrant for its participation in any and all activities, I hereby release, discharge, and/or indemnify the Jonesboro Men's Basketball League, its affiliated organizations, their sponsors, their employees, volunteers, and associated personnel, against any claims by or on behalf of the registrant as a result of the registrant's participation in the activities and/or being transported to or from the same, which transportation I hereby authorize CONSENT FOR MEDICAL TREATMENT and give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Dentistry. This care may be given under whatever conditions are necessary to preserve my life, limb, or well-being. I further agree to abide by the traffic rules and regulations of the State of Arkansas. I also release my image and comments in the form of photograph or video to be used solely by Jonesboro Parks and Recreation for promotion of the Jonesboro Men's Basketball League to the public through media.

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