CHAMPLAIN AND ROUSES POINT YOUTH COMMISSION

2027 BASKETBALL REGISTRATION FORM – "ONE FORM PER CHILD"

PARTICIPANT'S NAME:_____

GRADE:_____DOB:_____GENDER (CIRCLE ONE):___M OR F___

STREET ADDRESS:_____

TOWN/VILLAGE OF:_____

PARENT/GUARDIAN NAME:_____

EMAIL:_____

PHONE NUMBER:_____

Name/Phone Number if you are interested in COACHING:_____

My son/daughter_____ has my permission to participate in the above program. I understand that the participation in sports activity involves rigorous physical activity and creates a risk of physical injury, as the parent or guardian of the above-named child, I assume that risk. I hereby consent to emergency transportation and treatment of my child in the event of illness or injury. I further certify that my child named here in is in good physical condition and has no pre-existing medical or physical condition that would endanger the health, safety, or welfare of my child should he or she participate in youth commission sports activities. As the parent and/or guardian of the above-named child I hereby covenant and agree to the release and hold harmless to the extent permissible by law, the Town of Champlain and its employees from any and all liability, loss, damages, claims, or actions for bodily injury and/or property damages occurring by reason of the participation of my child in Youth Commission sports activities.

Signature of Parent/Guardian:_____

Print Name:_____ Date:_____

Please return forms to your school or email forms to recdept@townofchamplain.gov by November 20th, 2026 PLEASE NOTE NEW .GOV EMAIL

Office use only:

BOYS 3rd and 4th	GIRLS 3rd and 4th
BOYS 5th and 6th	GIRLS 5th and 6th

Revised October 24, 2026