

# Bitty Basketball

**Saturdays at the Boys & Girls Club of Oceanside**

**Child's Name:** \_\_\_\_\_

**School:** \_\_\_\_\_

**Parent's Name:** \_\_\_\_\_

**Available to Coach or Instruct?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**Phone #:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**T-Shirt Size:** YS YM YL YXL

Office Use Only

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\$35 Registration fee Paid?

Yes \_\_\_\_\_ No \_\_\_\_\_

Hold Harmless Agreement Signed?

Yes \_\_\_\_\_ No \_\_\_\_\_

**January 28th**

**February 4th**

**February 11th**

**February 18th**

**Practice:**

**Age 3-5**

**9-10am**

**Age 6-9**

**10-11am**

- Registration is \$35 per child.
- Each player will receive a Bitty Basketball T-Shirt.  
\*This is a volunteer coaching program\*  
(We ask that parents volunteer as coaches and instructors)



**Sign up at Boys & Girls Clubs of Oceanside**  
**401 Country Club Lane**  
**Oceanside, CA 92054**

**Contact Kyle Wood: 760-433-8920 or**  
**kwood@bgcoceanside.org**

Registration also available at  
[www.bgcoceanside.org](http://www.bgcoceanside.org)



**BOYS & GIRLS CLUB**  
OF OCEANSIDE

**HOLD HARMLESS AGREEMENT**

I, \_\_\_\_\_, do hereby give my son/daughter, \_\_\_\_\_, permission to attend & participate in activities sponsored by the Boys & Girls Clubs of Oceanside. I hereby release the Boys & Girls Clubs, its employees, associates and contributors from any liability, any injury, loss or damage incurred by my son. daughter while participating. I hereby hold harmless and release the Boys & Girls Clubs of Oceanside from any lawsuits, claims, action, damages, judgments and fess arising out of any personal injuries including death or any death or injury which results or increases by any action taken to medically treat my child. I hereby authorize medical emergency treatment for my son/daughter by licensed professional in the event of an accident and release the Boys & Girls Clubs of Oceanside from any liability resulting from this treatment.

I give consent to and authorize the use and reproduction of any photographs and any other audio- visual material taken of my child for promotional material, fundraising events, and sponsored programs or for any other use for the benefit of the program.

( ) Yes ( ) No

\_\_\_\_\_  
**Parent/Guardian's Signature**

\_\_\_\_\_  
**Date**

**RELEASE FORM**

I hereby grant permission for my child to use all of the play equipment and participate in all activities in the "Bitty Baksetball Program."

I understand that I am responsible for any damage done to my child with malicious intent to the equipment.

I understand that if my child is ill or shows signs of illness or communicable conditions that he/she is not to be brought to the Club for care or that, if he/she becomes ill during the day that the child must be picked up immediately.

I hereby grant the Boys & Girls Clubs of Oceanside to take whatever steps may be necessary to obtain emergency medical care if warranted. These steps may include but are not limited to the following:

- \*attempt to contact parent/guardian
- \*attempt to contact child's physician
- \*attempt to contact you through any of the persons listed on the Emergency Information form you completed

If the situation warrants and BGCO is unable to contact you or your child's physician, we will call 911 and your child will be taken to an emergency Hospital and any expenses incurred will be borne by the child's family.

The BGCO will not be responsible for anything that may happen as a result of false, incomplete, or outdated information provided by the parent or guardian.

\_\_\_\_\_  
**Parent/Guardian's Signature**

\_\_\_\_\_  
**Date**

**Additional Emergency Contact (other than already listed):**

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Relation**

\_\_\_\_\_  
**Phone Number**

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Relation**

\_\_\_\_\_  
**Phone Number**