KBA SPORTS ADULT BASKETBALL LEAGUES

Directions: All information must be valid and complete at the time of registration. See www.playkba.com for Deadlines and Start Dates.

Captain's Name:	Contact Phone #:
Address:	City, State, Zip Code:
Team Name:	E-mail Address:
Circle One: A B Corporate 30 & Over	League (Fees): $650.00 /$325.00 Deposit Due at sign-up. Remaining due by third game.

Note: No more then 10 players are allowed on one team. Rosters must be locked in after the 3rd game.

NAME Please Print First, Middle initial, & Last Name	Sex M/F	PHONE	E-MAIL	Last Team you played for.
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

.Please read and sign: *I/WE recognize and understand that basketball is a sport involving risks not encountered in everyday play. With this understanding, in consideration of the Kentucky Basketball Academy permitting myself to participate in the sports programs, I covenant and agree to indemnify and hold harmless and do release, requite and forever discharge, Kentucky Basketball Academy, its officers, coaches, referees, employees, volunteers and other such people as are connected with the league in any capacity, for any and all damages, claims, and/or liabilities arising out of any and all injury to or caused by myself. I hereby authorize any and all emergency medical treatment deemed necessary by any physician, nurse, or paramedic. A copy of this authorization shall be effective as the original. (Signature line above.)*

Team Captain's Signature

Date

For Office Use Only

Schedule League: _____

Staff Int. _____

Updated: 12/01/2009