Burley Basketball

Middle School Sports Program Sponsored by Albemarle County Parks and Recreation

***New 2017, Physicals Required to play, according to The General Assembly Senate Bill 665 (MedExpress Urgent Care Center at Pantops & Seminole Square offer Sports Physicals for $30, Bring Physical form and filled out Medical History Form)**

Important Registration Information (Physicals Required)

Return forms and $65 (cash or check made to Albemarle County) to Mr. Boyd at Burley beginning August 23th.

(Limit 40 boys and 40 girls for Basketball Program, First Come First Serve, Register Early, Fills up quickly!)

Dates: September 9 – October 24, 2019

Practice Times will be 4:10-5:45pm (Game days will run longer)
Girls will practice and play games on Tuesdays and Thursdays
Boys will practice and play games on Mondays and Wednesdays
Cost $65, includes Team T-shirt, 4 games and transportation to away games and then parent's pick-up at away school on game days.
(50% Scholarships Available for qualified students)
*Questions talk to Mr. Boyd at Burley or call Joe Clark at Parks and Rec. #296-5844

Program Rules & Registration

- Participants must be a student at Burley Middle School. This program is co-sponsored with Albemarle County Schools & Albemarle County Parks & Recreation.
- Participants must follow school rules as well as rules set-up by the coach/supervisor. Contact Joe Clark 296-5844 if you have questions or concerns during the season.
- Parents must realize that the coach/supervisor has the authority to suspend any individuals from the program if this action is determined to be in the best interest of the overall program. No refund if the participant is suspended from the program.
- Parents must pick-up their children by 5:45pm. A late fee of $15.00 will be charged if pick-up is at 6:00pm or later. This fee must be paid to the coach/supervisor before the participant can return.

(Please return bottom half of form with payment & keep top half for your records.)

Please Circle League: Girls League or Boys League

Please Circle Adult T-Shirt Size: Small Medium Large X-Large 2XL

Participant Name: ______________________________ Burley Grade (circle one) 6 7 8

Parent's Email: ______________________________ Home Phone #: ____________________

Home Address: ____
(Street Address) (City) (Zip Code)

Parent/Guardian Name: ____________________ Work/Cell Phone #: ____________________

Parent/Guardian Name: ____________________ Work/Cell Phone #: ____________________

Please list any medical conditions that we should know: ______________________________

- **I hereby give my child(ren) permission to be transported to all away basketball games.**
- The parent/guardian authorizes the Sports Program to obtain immediate medical care if any emergency occurs when he/she cannot be located immediately. The parent/guardian releases Albemarle County and its officers, agents and employees from liability that might be incurred during the course of the activity.

Parent/Guardian Signature: ______________________________ Date: ____________________

Amount Paid __________ Cash Or Check # __________