

# 2016 Youth Basketball Information

5-6, 7-8, 9-10 and 11-13 age groups

Ages 5-6 will be coed. 7-8, 9-10 and 11-12 will split the boys and girls.

5-6 year olds will be randomly placed on teams

Parents meeting will take place at assessments for age groups with assessments and 5-6 year old meeting will take place November 30.

Assessments for 7-8 year old boys will be December 6 at 6:30pm at the Boys and Girls Club

Assessments for 9-10 year old boys will be December 7 at 6:30pm at the Boys and Girls Club

Assessments for 11-12 year old boys will be December 8 at 6:30pm at the Boys and Girls Club

Assessments for the girls will be determined after registration is complete.

Games will begin in early January

8 game season. Final 2 Saturdays will be post-season tournament for 9-10 and 11-12. No tournament for 5-6 and 7-8.

Players are not allowed to play middle school and Rec League.

## Fees

\$40

Please register in person at the Parks and Recreation in Town Hall, by mail or online at [farmvilleparksandrec.com](http://farmvilleparksandrec.com)

Payment must be made by Cash, Check, or Money Order payable to the Town of Farmville if mailed or brought in.

## Parents Code of Ethics

- I will encourage good sportsmanship by demonstrating positive support for all players, coaches and officials at every game, practice, or other youth sports event.
- I will place the emotional and physical well-being of my child ahead of a personal desire to win.
- I will insist that my child play in a safe and healthy environment.
- I will support coaches and officials working with my child, in order to encourage a positive and enjoyable experience for all.
- I will demand a sports environment for my child that is free from drugs and alcohol, and will refrain from their use at all youth sports events.
- I will remember that the game is for youth - not for adults.
- I will do my very best to make youth sports fun for my child.
- I will ask my child to treat other players, coaches, fans and officials with respect regardless of race, sex, creed or ability.

## Players Code of Ethics

- I will remember at all times that I am a member of a team and will not place my own self-interests above those of my family.
- I will not cast blame on my teammates, we will win together as a team and we will lose together as a team.
- I will demonstrate self control and respect for others at all times, be they officials, spectators, or other athletes.
- I will remember that participation in athletics is a privilege that is not to be abused by unsportsmanlike like conduct.
- I will treat my opponents with respect, shake hands after competition and congratulate them on their performance.
- I will respect the integrity and judgment of the officials.
- I will remember that improper behavior while in uniform reflects poorly upon my parents, my community, my organization and myself.
- I will understand and abide by the rules of the games.
- I will accept victory with grace and defeat with dignity.
- I will remember that school is more important than my athletic activities and I will give 100% in the classroom, just as I do in my sport.

# Town of Farmville Youth Basketball

October 31 - November 28



## Farmville Parks and Recreation

3672 North Main Street  
Farmville, NC 27828

252-753-6712

[farmvilleparksandrec.com](http://farmvilleparksandrec.com)  
[mjohnston@farmvillenc.gov](mailto:mjohnston@farmvillenc.gov)

# Town of Farmville Parks and Recreation Department

## Youth Basketball Registration 2016

The Town of Farmville Parks and Recreation provides opportunities to people of all ages to participate in quality organized recreation programs through leagues, special events, camps and programs. We strive to teach fundamental skills and rules, teamwork and sportsmanship in a fun atmosphere with the leadership of well-trained volunteers and staff.

Participant Name: \_\_\_\_\_ Sex: M or F Date of Birth: \_\_\_/\_\_\_/\_\_\_ (Child's age as of July 31 2016, birth certificate required if first time playing)  
 Parent/Guardian Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Age group: 5-6 7-8 9-10 11-13  
 T-Shirt Size: YS YM YL AS AM AL AXL  
 Non-Parent Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 List any Medical Problems or Special Needs: \_\_\_\_\_

We are unable to accommodate any "play-up" or special requests.

The Town of Farmville Parks and Recreation Department welcomes the participation of all individuals, including those with disabilities or special needs. We are committed to compliance with the ADA and will provide reasonable accommodations to facilitate participation in our program. To ensure that reasonable accommodations are in place, program registration or accommodation requests should be received at least two weeks prior to the start date of the program. The Town of Farmville Parks and Recreation Department recommends that parents or guardians consult their participant's pediatrician or health care professional to assess their participant's ability to participate in the athletic program. It is requested that parents or guardians provide in writing any additional instructions for the specific condition or need of their participant.

I hereby pledge to provide positive support and care for my child participating in youth sports by encouraging and demonstrating good sportsmanship for all players, coaches, and officials at every game, practice and youth sports events. I will ask my child to treat other players, coaches, fans, and officials with respect regardless of race, sex, creed, or ability.

**Photography Waiver:** Pictures may be taken of my child while participating in Town activities and may be used for program publicity. If you do not concur please check this box.

**Release and Indemnity Agreement:** I understand that participating in the recreational program selected involves risk of injury. These risks include inclement weather, accidents while traveling, equipment problems or failures, contacts with actions of other participants, slips/trips/falls, and musculoskeletal injuries, among others. I choose for myself or for my child to participate in the selected programs despite the risks.

By signing the basketball registration form, I acknowledge all risks of injury, illness and death and affirm that I have assumed all responsibility of injury, illness or death in any way connected with participation in the program. I also agree for myself and for any child participant to follow all rules and procedures for the program and to follow reasonable instructions of the teachers and supervisors of the program.

In return for the opportunity to participate in this program, I agree for myself and for my heirs, assigns, executors and administrators to release, waive and discharge any legal rights I may have to seek payment or relief of any kind from the City, its employees or its agents for injury, illness or death resulting from this program. If I am registering a child for a program, I agree that I am a parent, legal guardian, or am otherwise responsible for the child whose application I am submitting and that I release, waive, and discharge any legal rights that I may request on behalf of the child participation in the program. I also agree not to sue the Town, its employees or its agents and agree to indemnify the Town for all claims, damages, losses, or expenses, including attorney's fees, if a suit is filed concerning an injury, illness or death to me or my child resulting from participation in the program.

**Parents Code of Ethics:** I have read and fully understand the Parents Code of Ethics. I hereby pledge to follow and obey the Code of Ethics to provide a safe and supportive positive atmosphere for my child and the other children in the program.

**Players Code of Ethics:** I have read and fully understand the Players Code of Ethics. I hereby pledge that I have reviewed this with my child and they will obey the Code of Ethics to provide a safe and positive learning atmosphere for themselves and other participants in the program.

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Volunteer Coaches Needed!** Volunteer coaches will work with teams under the direction of the Farmville Parks and Recreation. *Would you or your spouse be interested in coaching?*

Yes \_\_\_ No \_\_\_ Head Coach \_\_\_ Assistant Coach \_\_\_

**For Office Use Only:**  
 League Age \_\_\_\_\_  
 League: \_\_\_\_\_  
 Fee Paid: \_\_\_\_\_