



2022

Girls' BASKETBALL



Season begins:

FEBRUARY 19th

Volunteer coaches needed

TWO LEAGUES:

2nd-4th Grade

4th-6th Grade

* Six week schedule

*All games on Saturdays

*Practice one night a week

*4th Graders can choose to play in the younger or older division

REGISTRATION:

Please visit our website at www.thomastwp.org to register online or stop by our office at 249 N. Miller Rd.

\$50: Resident

\$55: Non-Resident

*Registration deadline is January 14th

*\$15 late fee will be charged after this date until January 21st

*Registration closes January 21st

Players in the older grade division will be drafted by the coaches at a player's clinic held Saturday, February 5th at 1:00 p.m. at Swan Valley High School

- For additional information call 989-781-0151 email park2@thomastwp.org ●
- Or visit our website at www.thomastwp.org/parks-recreation/recreation-opportunities ●

Girls' Basketball 2022

Player's Last Name: _____ First Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Township: _____

Phone Number: _____ Primary Email: _____

School: _____ Grade: _____ Age: _____ Gender: _____

Parents' Names: _____

Person Registering Child (*If other than parent*): _____

Circle: Resident \$50 Non-Resident \$55

Circle Shirt Size: YS / YM / YL / S / M / L / XL

Circle Grade Division: 2nd - 4th 4th - 6th

Office Use Only

Cash: _____ Check: _____ Check Number: _____

Received By: _____

Age/grade divisions subject to change based on enrollment

Kids are placed in division based on their grade for the 2021-2022 school year

(Checks payable to **Thomas Township General Fund**)

Registration **Deadline** - **January 14th** (\$15 late fee after this date until January 21st)

Registration **Closes** **January 21st**.

Online payment use e-check:



Convenience fee will apply

WE CANNOT GUARANTEE REQUESTS. Volunteer Coaches determine their teams practice times. Therefore, we **CANNOT** honor requests regarding practice schedules. Older divisions (4th-7th gr) can only honor requests between siblings.

My signature on this form verifies that I understand Thomas Township, its employees and volunteers, shall not be responsible for any injury to my child while participating in this basketball program. I waive and release Thomas Township from any and all claims.

Parent/Guardian Signature

Date

Volunteer Coach Name : _____

Coach's Phone _____ Shirt Size: _____