

# D11 2015-16 Basketball Information

## Evaluations

Chaplin Recreational Basketball features instruction, equal playing time, weekly practices and games against other towns (3<sup>rd</sup>-6<sup>th</sup> grade).

Recreational League Evaluations: Held at Hampton Elementary School Gym at the times shown below.

	<b>(Grades 3 &amp; 4)</b>	<b>(Grades 5&amp;6)</b>
<b>Girls</b>	Thursday 10/8 5:00-6:30 PM	Thursday 10/8 6:30-8:00 PM
<b>Boys</b>	Friday 10/9 5:00-6:30 PM	Friday 10/9 6:30-8:00 PM

## About the League

**Rec Basketball:** Evaluations as listed above. Practices begin on or about Nov. 4<sup>th</sup> and games begin December 7<sup>th</sup> through tournaments in March.

**Competitive Travel Teams:** Offered for boys/girls in 5<sup>th</sup> through 8<sup>th</sup> grades. Separate tryouts and additional fee applies. Travel players must play on recreation team (exception: PHHS M/S players).

**Fees:** Rec Basketball \$65.00 per player\*  
Competitive Travel Team \$40.00 per player\* (\$70.00 for Middle School)  
There is a \$15.00 discount per player for more than one child in a family

**Please make checks payable to Chaplin Rec**

Please Note: There is a \$10.00 late fee for registrations received after October 18<sup>th</sup>. For registrations received after October 27<sup>th</sup> players will be accepted only if there is roster spots available. Please don't wait to register and chance having your child excluded from the upcoming season.

\* Please note that during the season expect to have two practices a week with games on Saturdays. Specific practice days & times for teams are not set until coaching positions are set. This will be finalized after teams are drafted.

# D11 2015-16 Basketball Registration

Please Print Clearly

Use a Separate Form for Each Child(& Travel Team)

Please fill this out in its entirety and return it with your child to be collected in the office with payment included in a sealed envelope.

Please note: if you are a Scotland family, please return it to the Chaplin Town Hall with check payment.

## Level

\_\_\_\_\_ Grade 3 & 4

\_\_\_\_\_ Grade 5 or 6

\_\_\_\_\_ Travel Team 5/6 or 7/8      GIRLS      BOYS

## Player's Information

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

Sex (Circle One)              Male              Female

Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-Mail Addresses: \_\_\_\_\_

### Shirt Size

Circle One  
Please size up  
1 shirt size

YS   YM   YL  
AS   AM   AL  
XL   XXL

## For Signature

Having been informed of the organization of the Chaplin Basketball Program in the Towns of Hampton Scotland and Chaplin, CT to provide supervised basketball activities and games for youth: I/we the parent(s) or legal guardian(s) of the above named registrant do hereby give my/our approval for his/her participation in any and all of the activities during the current basketball season. I/we do assume all the risks and hazards incidental to the conduct of activities, transportation to and from the activities. I/we agree to accept the results of whatever selection process for ALL teams H/C may employ and I/we do further hereby release, absolve, indemnify and hold harmless the Chaplin Rec Commission, all organizers, the league and any supervisors, managers, or coaches, referees, any or all of them.

Parent/Guardian Name (Please Print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ DATE \_\_\_\_\_