



Seaboard Region Basketball League 2012

Registration Information & Preliminary League Rules

To register for USY/Kadima Basketball:

Most teams are by synagogue but your synagogue does NOT need its own team for you to participate!! You can either register by contacting your synagogue's Youth Director/Advisor or you can register directly through Seaboard Region. In either case, you will need to complete the attached registration form. The price to register through Seaboard Region is \$71 per player and checks should be made out to "Seaboard Region USY." If your synagogue has a team you'll automatically be assigned as a player on that team. If your synagogue does not have its own team, you'll be assigned to a team in the league. (Please note that the registration cost may be less expensive if you register through your synagogue. You will NOT be reimbursed for this amount if you choose to register through Seaboard Region.)

- ◆ **All players must be members of USY or Kadima. If you are not yet a member of USY/Kadima, just contact your synagogue's Youth Director/Advisor and they can help you officially join! If you are not a member of a Conservative synagogue, please contact Shayna Kritz and she can help you find a USY/Kadima chapter to join!**
- ◆ All players must participate in the team for their age-group, with high school students playing only on USY teams and middle school students playing only on Kadima teams.
- ◆ USY teams will play games against other USY teams; Kadima teams will play games against other Kadima teams.
- ◆ All games will be played at Richard Montgomery High School in Rockville, MD.
- ◆ Each team is required to have an adult coach present at every game who is responsible for organizing the team, holding all members of the team to the league's rules, and ensuring that the team uses the proper decorum at all times before, during, and following games. If this adult is someone other than the coach listed on the team registration form, he/she must be approved by Shayna Kritz or by the Basketball League Commissioner.
- ◆ No food or beverage will be allowed in the gym other than water bottles.
- ◆ Any team not fully prepared to play (having at least 5 players and a coach present) by ten minutes after the official starting time will forfeit that game.
- ◆ Any player not presenting a fully completed registration and medical release form, including all signatures is ineligible to play. There will be **NO EXCEPTIONS** to this rule!
- ◆ Players may not participate without rubber soled shoes.
- ◆ All team members must wear the designated uniform or colored t-shirt.
- ◆ Decisions by the referee are FINAL and non-negotiable. Unsportsmanlike conduct by players, parents, or team staff will result in a warning. A second offense will result in an ejection from the gymnasium.
- ◆ The Seaboard Region USY and Kadima Basketball League Coordinator (or his/her designee) shall have the authority to determine sanctions to be applied against individuals and/or chapters/teams for infractions of the above or for any behavior deemed inappropriate by the League Coordinator.
- ◆ Team Cancellation Policy: If a team needs to cancel a game, they must contact the League Coordinator 24 hours in advance. If the team fails to comply with this rule more than once the team will be expelled for the season.
- ◆ **Exact game rules will be sent to all team captains and coaches prior to the beginning of the season.**

If you have any questions, please contact:

Shayna Kritz, Assistant Regional Youth Director at (301) 230-0801 x 3 or Kritz@uscj.org

Seaboard Region USY & Kadima Basketball League 2012

Release Form and Insurance Information

Name _____ Chapter _____
Phone _____ Email _____
Graduation Year _____ Address _____

Parent Release Form

I hereby grant permission to my child, _____ to participate in the Seaboard Region USY & Kadima Basketball League. In consideration of such participation, I release the Seaboard Region USY & Kadima Basketball League and all of its employees, volunteers, and participating organizations, regarding any and all liability arising from such participation. I understand that this activity, as all sporting activities, involves inherent dangers particular to such sports activity.

I agree to hold harmless and indemnify the Seaboard Region of United Synagogue of Conservative Judaism and the United Synagogue of Conservative Judaism from any and all claims or causes of action instituted by my child or on behalf of my child arising out of his/her participation in the Seaboard Region USY & Kadima Basketball League.

I agree that any Seaboard Region USY & Kadima Basketball League referee, employee, or supervisor shall retain the authority to refuse the participation of my child for reasons of inappropriate behavior, unsportsmanlike conduct, or the failure to follow instructions of the supervisor of the activity. I further grant such supervising adults necessary authority to render immediate emergency medical care to my child, until such time as I or my child's legal guardian shall be contacted.

I have been made aware of the fact that the event in which my child is participating may be photographed by either amateur or professional photographers, and that the photographs taken may be used both for purposes of reporting on the event or for such other use as the USY organization may determine. I have no objection to the pictures taken being used at any time for promotional use. It is my understanding that by signing this document I consent to the use of the pictures just referred to for any purpose whatsoever.

Parent or Legal Guardian Signature _____
Date

General Information

T-SHIRT SIZE: Youth Large (for Kadima only) Youth X-Large (for Kadima only)
 Adult Small Adult Medium Adult Large Adult X-Large Adult XX-Large

INSURANCE INFORMATION:

Name of Insurance Company: _____ Insurance Company Phone Number: () _____
Policy Number/ ID Number: _____
Insurance Company Address _____

PARENT INFORMATION: Please provide the following information so we can contact your parents in the case of an emergency.

Father's Name: _____	Mother's Name: _____
Father's Home Phone: () _____	Mother's Home Phone: () _____
Father's Cell Phone: () _____	Mother's Cell Phone: () _____
Father's Email: _____	Mother's Email: _____

EMERGENCY CONTACT INFORMATION: Please provide the following information for two people **other than parents** who can be called in an emergency when **neither parent** can be reached.

1. Name: _____	2. Name: _____
Relationship: _____	Relationship: _____
Phone: () _____	Phone: () _____

USYer/Kadimaniks Signature

I _____ (teenager's name) agree to abide by all league rules and conditions set forth by the Seaboard Region USY & Kadima Basketball League Coordinator and game referees.

Signature: _____ Date: _____