



Basketball Academy

TUESDAY EVENINGS
Grades 2 – 4th 5:30pm-7:00pm
Grades 5 – 7th 7:00pm-8:30pm
Craig Middle School (702 S Judge Ely)



Submit form to AYSA:
4351 Ridgemont Dr #E Abilene, TX 79606
Fax 325.695.7840 info@abileneysa.org

REGISTRATION FORM

Athlete Name: _____

Athlete Age: _____ DOB: _____

Grade: _____ **CIRCLE** Gender: Male / Female

CIRCLE Shirt Size: YS YM YL AS AM AL

Athlete School: _____

Parent/Guardian Name: _____

Street: _____

City: _____ St: _____ Zip: _____

Phone: _____ Email: _____

Emergency Contact: _____

Emergency Phone: _____

Event Dates (Please Check One):

- April 24 – May 29: Registration Fee \$70
- September 11—October 16: Registration Fee \$70
- Both Event Dates: Registration Fee \$130

PARTICIPATION WAIVER:

I ACKNOWLEDGE that the Firm Foundation Academy, like any physical activity includes the potential risks of serious injury and/or property loss, and I assume all risks for my child to participate. I UNDERSTAND that should my child miss any sessions due to any reasons beyond the control of AYSA, including personal sickness, injury, schedule conflict, or other reason, my pre-registration fee will not be refunded. I HEREBY agree to allow my child’s photograph, video, multimedia or film likeness to be used for any legitimate purpose by AYSA in the promotion of their organization and programs. I AGREE TO WAIVE, RELEASE and DISCHARGE from any claim in respect of death, disability, injury, property loss or damage as a result of or while my child participates in this program, the organizers, D1, AYSA, AISD, WISD, directors, sponsors, officials, or volunteer helpers, I AGREE TO INDEMNIFY the persons mentioned above immediately for any or all liabilities or claims made against them as a result of my behavior in this program. Said WAIVER, and all contents above to extend to liability for negligence under common or state law.

(Guardian Printed Name)

(Guardian Signature)

Date: _____