

# FIRST ARP CHURCH SPORTS MINISTRY

## 2012 BASKETBALL REGISTRATION

A new season of basketball is about to begin at First ARP Church! Through the avenue of sports, our goal at First ARP is to help children:

- Gain self confidence through learning new skills
- Grow in their social interaction with other children
- Develop teamwork and sportsmanship
- Grow in their spiritual maturity

### **How can I sign-up?**

Mail in this form and your check to:

**FIRST ARP CHURCH SPORTS MINISTRY**  
**317 South Chester Street**  
**Gastonia, NC 28052**

**\*Registration forms and payment must be received by Friday,  
November 18th\***

### **What are the age groups?**

4 year old	“Drills & Thrills” **each player will need his/her own basketball**	Skills team	Cost \$35
5-6	Basketball (Co-ed)	Inter – Church League	Cost \$45
7-8	Basketball (Co-ed)	Inter – Church League	Cost \$45
9-10	Basketball (Co-ed)	Inter – Church League	Cost \$45

*\*Your participation group will be determined by the age of the participant on October 16, 2011\**

*\*If we are unable to field a basketball team for your child's particular age group, you will receive a full refund. After the teams have been formed, there will be no refunds.*

### **When do games begin?**

Basketball games will begin in January. Coaches will be given schedules, which will be passed out, to all participants.

### **What about uniforms?**

First ARP will provide a jersey with the team name. When you sign-up, please indicate the size of jersey needed. Jerseys will be passed out during practice before the beginning of the first game. Other uniform and equipment needs must be purchased at the expense of the participant.

If you have any further questions contact Carrie Curtis;  
704-810-9406 home,  
704-678-5240 cell, or  
Carrie20curtis@bellsouth.net

# FIRST ARP CHURCH BASKETBALL REGISTRATION FORM

Paid \_\_\_\_\_

Check # \_\_\_\_\_

Player's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (home) \_\_\_\_\_ Phone (cell) \_\_\_\_\_

Player's Birth Date: \_\_\_\_\_ Age on October 16, 2011 \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

*\*\*all communication will take place via email unless specified here\*\**

Church Attending: \_\_\_\_\_

Emergency Contact Person & Number: \_\_\_\_\_

**Male ( ) Female ( )**

**T-shirt Size Player:** Youth – Small ( ) Medium ( ) Large ( ) X-Large ( )

**If coaching:** Adult - Small ( ) Medium ( ) Large ( ) X-Large ( )

Please Circle One:

4 year old "Skills & Thrills"

5 & 6 year olds (co-ed)

7 & 8 year olds (co-ed)

9 & 10 year olds (co-ed)

Would you be interested in helping out by coaching one of the basketball teams?

**Yes ( ) No ( )**

**Please understand that all requests will be considered but not guaranteed.**

I do hereby give \_\_\_\_\_ permission to participate in the First ARP Church basketball program. By signing this form, I agree that in the event that he/she is disabled, injured, or incurs a disease of temporary or permanent nature while participating as a member of the program; to release, indemnify, and hold harmless First ARP Church, its employees, and volunteer coaches from all actions and costs arising there from, and do hereby assume all risks associated in sports activities.

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**(Parent or Legal Guardian)**

**(Date)**