



Determined Athletes MEN's FALL LEAGUE

2019 PLAYER REGISTRATION FORM 18 and over

LEAGUE BEGINS Wednesday September 25, 2019

Gym Location is Renegades Kelly Bolish Gym, 2950 Turnpike Dr., Hatboro, PA

\$950.00 Cost per Team for 8 games plus playoffs

Checks Payable to: RENEGADES, 858 Street Rd., Southampton, PA 18966

Or pay by credit card via website: www.renegadesbasketball.com

Games to be played every Wednesday night at 8pm, 9pm, 10pm

Deadline to register your team Wednesday September 18, 2019

Schedule will be posted online at www.renegadesbasketball.com

Team Captain _____ (must be filled in)

Player Name _____ Height _____

Address _____

City/State _____ Zip _____ Date of Birth _____

ADULT SHIRT SIZE: S M L XL 2XL 3XL 4XL (circle one)

CELL PHONE # _____

E-MAIL ADDRESS _____

1. All persons are required to be covered by a personal or family medical plan including hospitalization before they can participate in the program. I certify that the person named above is covered by such a plan.

2. I hereby assume all risks associated with my participation in the Renegades Determined Athletes Men's League Program and agree to hold harmless the Renegades Organization, their officers, coaches and participants for any and all claims or injuries arising out of participation in the Renegades Determined Athletes Men's League.

3. I have completed and understand the details of this form and attest to its accuracy. I hereby grant permission to any licensed physician to perform or provide necessary medical care or aid to me if injured in connection to the playing of basketball.

(signature) _____ (date) _____