

Westside Basketball League Permission Form

Welcome to the [Westside Basketball League](#)! We hope that you, your family and your athlete enjoy the league. We ask that you remember two very important items:

- ✓ these children **ARE NOT** professional athletes, and
- ✓ these games are intended to be fun

If your child is interested in playing **BASKETBALL** during the 2020-2021 basketball season, please fill out the permission form and read the code of conduct provided. *By signing the permission form, you, your family members and friends agree to follow the Westside Basketball League rules and code of conduct.*

The league will enforce COVID-19 precautions this season. All individuals entering and exiting the facilities **MUST** wear a mask that covers their nose and mouth. All attendees, including league staff, coaches and officials, **MUST** always wear a mask that covers their nose and mouth. Players, while participating in the game, do not have to wear a mask. Players **MUST** have individual water bottles. Coaches are responsible for cleaning their bench of water bottles and garbage after each game. The league will provide hand sanitizer. The league will frequently sanitize the game ball during each game. Each facility will have a designated entrance and exit. Other precautions will be instituted as needed or required.

Either return your completed form with the registration fee at an in person sign up date or mail the completed form and fee to the following address:

Westside Basketball League
2340 River Road
Morgantown, WV 26501

Basketball Fees

Kindergarten through Second Grade \$60.00 per athlete.
Third through Sixth Grade Community \$70.00 per athlete.

****The fee must be paid when your child registers.**

****NO league fees will be reimbursed.**

****The league does not provide team jerseys.**

Door Fee for Each Game

- Adults (18 and over) \$4.00
- Head Coach and One Assistant Coach are free (Must Present Official Pass)

Due to the pandemic there will not be a community draft this year. Community team assignments and alternative methods for teams will be made by the Westside Basketball League board of directors. Children on a Westside established team will remain on their team from the previous season if noted on the sign-up form below. The league will make every effort to keep teams from other leagues together.

Basketball Season Schedule

Possible game dates range from November through March. Remember if the league must cancel games due to inclement weather, notice will be posted on the league website and league Facebook page.

Games will be held at Hazel & J.W. Ruby Community Center at Mylan Park (111 Mylan Park Lane, Morgantown, WV 26501) and Kelsie Elaine Moore Recreation Center (1407 Brookhaven Rd Morgantown, WV 26508). Other sites will be determined on an as needed basis.

Players in the Second, Third/Fourth and Fifth/Sixth grade divisions will have tournaments following the regular season schedule. Tournaments begin the weekend following the regular season if permitted.

Westside Basketball League Permission Form

First Name **Middle Initial** **Last Name**

PO Box or Street Address **City** **State** **Zip**

Home Telephone **Alternate Telephone** **Email Address**

School **Grade** **Age as of 11/1/2020**

My child participated in the _____ league last year
League Name

and was coached by _____
Coaches Name

The league needs volunteer coaches and assistant coaches for basketball. If you are interested in being a volunteer coach or volunteer assistant coach, please check the appropriate box:

___ **Head Basketball Coach**

___ **Assistant Basketball Coach**

Name

Telephone Number

My child _____ has permission to practice and participate in the Westside Basketball League. My child has been medically examined to my satisfaction and has no conditions, which either limit or could worsen by participating in this program. I understand that the basketball league has only a supplemental insurance policy. My child is covered by my medical and/or other insurance to my satisfaction. In the event of an emergency when I cannot be contacted, I authorize a team and/or a league official to obtain medical treatment, including transportation to a local hospital.

Name of Parent/Guardian: _____

Parent Guardian/Signature: _____

Date Signed: _____

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WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate on behalf of the Westside Basketball League and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the Westside Basketball League their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of participant: _____

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Name of parent/guardian: _____

Parent guardian/signature: _____

Date signed: _____