

#### PRESENTING PARTNER

# THE CASTOR RECREATION OFFICE IS EXCITED TO ANNOUNCE THE ARRIVAL OF THE STEVE NASH YOUTH BASKETBALL PROGRAM!

#### Overview

Steve Nash Youth Basketball is a national youth basketball initiative designed to develop fundamental skills, sportsmanship and a love for the game of basketball. The program objectives focus on participation, education, development, progression and character building.

#### **Materials**

Each child that participates in the program will receive:

- Steve Nash Youth Basketball Reversible Jersey
- Molten Basketball
- SNYB Drawstring Bag
- Poster
- Certificate of Participation

#### **Participants**

Grades 3-6

#### Cost

\$125 per child

#### **Dates and Time**

Sundays from 2-3pm from November 20, 2016 to February 19, 2017 (12 sessions)

#### Location

Gus Wetter School

#### **Registration Deadline**

Registration can be completed by filling out the form on the back and submitting it to the Town of Castor Recreation Office or by visiting the Recreation Office. Deadline for registration and payment is October 28, 2016.





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## PARTICIPANT REGISTRATION FORM

PARTICIPANT INFOR	MATION			
First Name:		Last Name:		
Date of Birth:		Gender:	Male	Female
Age:	Years with SNYB:	Jersey:	Youth	Adult
Address:				
City:	Province:		Postal (	Code:
Please note any medical conclub/organization should be				
PARENT/GUARDIAN	INFORMATION			
First Name: _		Last Name:	-	
Day Phone:		Night Phone:		
Email: _		Р	referred Language:	English
Emergency Contact: _			Emergency Phone:	
A) To allow Canada Basketball and its me promotional materials, and other me     B) To promote, communicate, and mar.	Canada Basketball and/or your provincial basketball ember provincial associations to collect, store, share, ar member provincial associations to manage ongoing me arketing information about our programs and services; ket products, programs, and services from Canada Bask of receiving all such communication and information f	nd use that information for dia relations, evaluate, mo ketball, its member provinc	the following purposes: aintain, monitor, and improve p cial associations, and their vario	programs to provide you with offers,
<ol> <li>The risk of injury from activities invo</li> <li>I knowingly and freely assume that sponsors, advertisers, and if applicabed</li> <li>I willingly agree to comply with the participation, I will remove myself from the loss or damage to person or property.</li> <li>I further agree to irrevocably grant or injury to record, reproduce, broaded developed, in connection with my attention title, or interest in my attention.</li> </ol>	rticipate in SNYB programming and related activities, the lived in SNYB is significant, and while rules, equipment, all such risks, known and unknown, even if arising froble, owners/lessors of premises used, and any related electated and customary terms and conditions for participation and bring such to the attention of the rs, assigns, personal representatives, and next of kin, hy, whether caused by the negligence of the releasee(s) canada Basketball, and their affiliated Provincial/Territiast, exhibit, publish, sell, distribute, or use in any watendance and participation in the SNYB program, included ance or participation or any materials produced here to with legal responsibility for this participant, consent and	and personal discipline momenth the negligence of Canvents and/or activities (the ticipation. If, however, I nearest official immediate hereby release and hold hor otherwise; torial Sports Organizations way whatsoever my name ding without limitation a viunder.	ay reduce this risk, the risk doe ada Basketball, referees, voluing releasee(s)), and assume full observe any unusual significally; armless the releases, with respirate or assigns, the perpetual unlimental in and likeness in any media, ideotape recording of such perioda.	is exist; inteers, and/or employees, players, responsibility for my participation; ant hazard during my presence or sect to any and all injury, disability, imited world-wide and royally free whether now known or hereafter formance. I agree that I shall have
myself, my heirs, assigns, and next of kin,	I have read this waiver and release of liability. I fully involvement or participation in the program as provia	understand its terms and	agree to indemnity the release	ee(s) from

Date:

Signature: