



**PORTLAND PARKS & RECREATION**

Healthy Parks, Healthy Portland



**Saturday Youth Basketball 2017  
Team Registration & Classification Form  
Register from October 10<sup>th</sup> – November 28<sup>th</sup>, 2016**

Team Name \_\_\_\_\_ School Affiliation \_\_\_\_\_

Head Coach \_\_\_\_\_ New Coach [ ] Returning Coach [ ]

Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Day Phone \_\_\_\_\_ Email \_\_\_\_\_

Additional Adult Assistants: Name \_\_\_\_\_ (Please print clearly) Phone \_\_\_\_\_

Name \_\_\_\_\_  
Phone \_\_\_\_\_

**Team Status:** New Team  Returning Team  Number of years team has played together? \_\_\_\_\_

If you played last season, under which classification did you register? Low  Medium  High  League # \_\_\_\_\_

**Team Registration- Please check one:**

**Recreational Division** 3<sup>rd</sup>  4<sup>th</sup>  5<sup>th</sup>  6<sup>th</sup>  7<sup>th</sup>  8<sup>th</sup>

**Gender:** Boys  Girls

**Rank Your Skill Level:** Low  Medium  High

**High School Division:** 9<sup>th</sup> & 10<sup>th</sup>  11<sup>th</sup> & 12<sup>th</sup>

**Gender:** Boys  Girls

**Rank Your Skill Level:** Low  Medium  High

**Registration will be accepted only if it includes the Registration & Classification form; signed Criminal Record Check Consent, and Code of Conduct forms; and the appropriate team fees.**

Mail all forms and fee to:

**PP&R Youth Basketball  
10850 N Denver Ave.  
Portland, OR 97217**

**Team Fee Rec Division** (select one) **Grades 4-8:** \$450 \_\_\_\_\_ Scholarship Fee: \$400 \_\_\_\_\_  
**High School Grades 9-12:** \$585 \_\_\_\_\_

**Late Fee** (if applicable) \$50 \_\_\_\_\_ **Total Fee** \$ \_\_\_\_\_

Cash  Check  check # \_\_\_\_\_ Make check payable to the **City of Portland**

Visa  MasterCard  card # \_\_\_\_\_ Exp \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please check that the following forms have been signed.**

Coach Name \_\_\_\_\_ Criminal Record Check  Insurance  Code of Conduct

Asst. Coach Name \_\_\_\_\_ Criminal Record Check  Insurance

Asst. Coach Name \_\_\_\_\_ Criminal Record Check  Insurance

Staff use only: Registration taken by \_\_\_\_\_ Date \_\_\_\_\_

