HOUSE LEAGUE
2011

Name: _____

Address: _____

Telephone # _____ Email Address: _____

Date of Birth: _____ Grade: _____ Health Card #: _____

Month/ Day/Year

If new to program, please indicate Shirt Size: **Youth** S M L **Adult** S M

Emergency Contact (If not present during sessions) _____

Emergency Phone #: _____

Medical Conditions or Allergies: _____

I hereby authorize my daughter, _____, to participate in the TRANSWAY BASKETBALL HOUSE LEAGUE. I authorize the program organizers to act for me in their best judgement in any emergency requiring medical attention. I hereby agree to save harmless the TRANSWAY BASKETBALL HOUSE LEAGUE, it's organizers, sponsors, agents, officials and representatives from all liability however caused in connection with taking part in the TRANSWAY BASKETBALL HOUSE LEAGUE.

Signature of Parent or Guardian: _____ Date: _____

WHEN: Sunday, September 25 – December 04, 2011 (Ages 5-13)

For Children (age: 7 and under): Sunday September 25 – March 4, 2012 (@ $140.00

WHERE: St. Lawrence School ** New Site **
88 Macaulay Street East, Hamilton, Ontario

TIME:	**Girls born 2004 and younger**	**@ 9:00 - 10:00 a.m.**
	Girls born 2002 and 2003	**@ 10:00 – 11:00 a.m.**
	Girls born 2000 and 2001	**@ 11:00 – 12:00 noon**
	Girls born 1998 and 1999	**@ 12:00 – 1:00 p.m.**

COST: $ 75.00 per player due at first session
$ 85.00 if you require a reversible jersey
Shirt size: Youth S M L **Adult** S M

Discount of $10.00 per additional player from immediate family
Cheques made payable to: ***Transway Basketball***

Mail Application to: Transway Basketball House League Program,
82 Abbey Close, Ancaster, Ontario L9G 4K9