TOWN OF CORTLANDT GIRLS YOUTH TRAVEL BASKETBALL					
Grades 4th Grade 5th Grade 6th Grade 7th Grade 8th Grade 10th Grad	Time er 3 6:30F er 3 8:00F tober 12 6:30 tober 12 8:00 er 11 8:00 oth, 6th, 7th, 8th grades keland District Schools 7th, and 8th grades. F	PM-8:00PM PM-9:30PM PM-9:30 PM PM-9:30 PM PM-9:30 PM s as of Septemb s. Teams picked	Location Muriel H. Muriel H. Blue Mou Blue Mou Blue Mou ber 2022, who res at the coaches comportion of this	Morabito Community (Morabito Community (Intain Middle School Ide in the Town of Cortl Idiscretion. There will be	Center andt Five
tryouts or return it to the Recreati Fee: \$225.00 with ID Card/\$2 Payment of registration for CASH AND/ OR CHECK For more information please cont	230.00 without ID Cardee due after accepted ATION OR CREDIT CARONLY)	d on team ARD PAYMENT	'S;	Town of Cortlandt Recreation 1 Heady Street Cortlandt Manor, NY 10567 Attn: Travel Boys Basketball 4-1056.	
Name Last, First					
Birthdate		Age (Grade Sept '22	Height Ft.	In.
School	ol Email				
Home Phone # Cell Phone #					
Played Before? Circle One: Yes / No	Team Name				
INJURY RELEASE: I agree, or agree on behalf of my minor child, to assume: (i) all risk of personal injury or loss; (ii) bodily injury; and (iii) damage to, loss of, or destruction of any personal property resulting from or arising out of participation in the designated activity. I also release, waive, indemnify, hold harmless, and discharge the Town of Cortlandt from all claims, damages, and injuries arising out of my or my minor child's activities, including my or my minor child's use of equipment and facilities provided by the Town of Cortlandt.					
COVID-19 RELEASE: By granting permission for my min voluntarily assume the risk that this child may be expose her participation in any programs sponsored by the Town volunteer coaches, employees, and hired independent co	d to or infected by COVID-19 by hi n of Cortlandt, then my heirs, succ ontractors, for exposure to COVID-	s or her participation. I essors, assigns, and I h 19, and my heirs, succe	agree that if he or she is ex ave waived any right to ma ssors, assigns, and I shall h	sposed to or infected by COVID-19 d intain a lawsuit against the Town of nold the Town of Cortlandt harmless	uring his or Cortlandt, with respect
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Parents Signature				_ Date	
THE TOWN OF CORTLANDT DOES NOT PROVIDE ACCIDENT INSURANCE					
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