

TOHONO O'ODHAM NATION RECREATION DIVISION  
Youth Basketball League (YBL)

**June 13<sup>th</sup> – July 19, 2024**

**What is YBL:** A recreational, fun basketball league for all community youth, boys, and girls, open to all 4-15 years old. Learn the basics, teamwork, and have fun!!

**Registration:** Open from May 21<sup>st</sup> – June 4<sup>th</sup>, 2024; *unless filled* (No registration fee)

**Division by Age (Circle One):**

Itty-Bitty: Ages 4-6

Pee-Wee: Ages 7-9

Minors: Ages 10-12

Juniors: Ages 13-15

**FOR MORE INFORMATION:**

Contact any of our 5 Recreation Centers or email [askrecreation@tonation-nsn.gov](mailto:askrecreation@tonation-nsn.gov)

**Sells Recreation  
Center:**

Phone Number:  
(520) 383-1260

**Pisinemo  
Recreation  
Center:**

Phone Number:  
(520) 362-3699

**Al Jek  
Recreation  
Center:**

Phone Number:  
(520) 362-3675

**Hickiwan  
Recreation  
Center:**

Phone Number:  
(520) 362-3702

**San Xavier  
Recreation  
Center:**

Phone Number:  
(520) 393-4075

Assumption of all risk and release of all claims

I permit my child to participate in the Youth Basketball League Program with the Tohono O'odham Nation Recreation Division.

I recognize there are risks associated with strenuous physical exertion when engaging in a youth basketball program, which may result in serious injury or death. I certify to the best of my knowledge; my child's physical condition is satisfactory to participate in physically demanding activities and if in doubt of my child's condition I have been advised to the advice of a competent physician and abide by his/her advice. In case of injury, I authorize the Tohono O'odham Nation Recreation Division Youth Basketball League Program instructors/officials to summon professional help for treatment or transportation.

I, the undersigned have read this release and assumption of risk and understand all its terms. I execute it voluntarily and with full knowledge or its significance. I hereby represent that I am the legal guardian and legally capable of executing the release and assumption of risk.

**Please Print Clearly**

Participants Name \_\_\_\_\_ DOB \_\_\_\_\_

Community/District \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Directions to house: \_\_\_\_\_

Parent or Guardian

Name \_\_\_\_\_ Phone/Cell \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone/Cell \_\_\_\_\_

\*Submit proof of age: **(Circle One)** Birth Certificate, CIB, Immunization Record or other \_\_\_\_\_

**For Office Use Only:**

Application received by (staff name): \_\_\_\_\_ Date: \_\_\_\_\_

Proof of age submitted: Yes / No

# Tohono O'odham Nation Recreation Division Sports Team

## Team Player & Parent/Guardian Agreement

### **Player Agreement**

I agree to

Treat Coaches, teammates, opponents, referees, and spectators with courtesy and respect.

Accept the decisions of the referees without gesture or argument.

Control my temper and not use inappropriate, derogatory, or vulgar language.

Never criticize the play of others and never blame others for my mistakes.

Follow instructions of my coach without argument. This includes instructions regarding playing time and position.

Work hard, concentrate, cooperate and not be disruptive in practices and games.

Play my part in arriving on time to practice and games. Obey any team rules the coach puts in place.

Play to win but always fairly and with good sportsmanship.

Refrain from use of drugs, alcohol, tobacco products and/or any illegal substance while participating in the league.

TEAM PLAYER NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

### **Parent/Guardian Agreement**

I understand that the organization's policy is as follows: The use of drugs, alcohol, tobacco products and/or any illegal substances by parents and other spectators is strongly discouraged at games and practices. I also understand that my child's participation is strictly voluntary, and my child has agreed to the above and that violation will result in consequences given by Coach or Recreation Staff. Consequences may result in short term or long-term suspension or exclusion from the team.

As a parent, I agree to:

Not coach or give instruction to the players including my own child during games or practices.

Never openly express criticism for players or other teams.

Never openly criticize referees during the game.

Never confront the Coach or Team Manager with emotional issues in front of the players.

Never use inappropriate, derogatory, or vulgar language during a game or practice.

Ensure my child has the means to arrive and be picked up on time for practices and games.

Encourage my child to be the best team player that he or she can be.

Be the best role model I can be.

PARENT/GUARDIAN NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

### **For Office Use Only:**

Received by (Staff): \_\_\_\_\_ Waiver of Liability: Yes / No

Date Received: \_\_\_\_\_