## \*\*REC WILL BE FOLLOWING STATE COVID PROTOCOLS IF ANY ARE IN EFFECT\*\*

## RIDGEFIELD PARK BOARD OF RECREATION BASKETBALL 2021-2022 SEASON EARLY BIRD REGISTRATION OPEN UNTIL AUGUST 15, 2021

Eligibility: Grades 3 - 8 (as of September) who live in or attend school in Ridgefield Park

Checks should be made payable to: RP BOARD OF RECREATION

**Early Bird Fee Only**: \$50.00 per child; \$40.00 for each additional child **NO REFUNDS ON REGISTRATION FEES! Fee after August 15**: \$55.00 per child; \$45.00 for each additional child **NO REFUNDS ON REGISTRATION FEES!** 

## PLEASE NOTE: NO REGISTRATIONS ACCEPTED AT EVALUATIONS

MAIL EARLY BIRD REGISTRATIONS to: Board of Recreation, 234 Main Street, Ridgefield Park.

NO CASH ACCEPTED AT CLERK'S OFFICE!! PLEASE DO NOT USE THIS FORM AFTER AUGUST 15

All registration forms must be submitted by 10/25 to guarantee a spot on a team.

Season: November 2021 - March 2022

Program: 3rd and 4th Grade Boys 3/4/5th Grade Girls

5th and 6th Grade Boys 6/7/8th Grade Girls

7th and 8th Grade Bovs

Evaluations will be at Lincoln School as follows:

Mon., Nov. 1 – 3rd/4th & 5th/6th Boys at 6:30 p.m.

Mon., Nov. 1 – All Girls at 6:30 p.m.

Wed., Nov. 3 – 7th/8th Boys 7:15 p.m. - 8:30 p.m.

REGISTRATION FORM - PERMISSION SLIP (FIRST TIME PARTICIPANTS MUST BRING BIRTH CERTIFICATES)

Name:				Boy:	Girl:		
Address:				Town:			
Address: School:		Grade (	as of Sept.):_	Birth dat	te:		
Phone #:		Email:					<del></del>
Shirt Size - Please				•		OR EACH PLAYI SHIRT UNTIL DI	
Youth Medium	Youth Large	Youth XL	Adult Small	Adult Medium	Adult Large	Adult XL	
Do you have any r	medical condit	ons? (Use	Back of Form i	f Needed)			
I/We, parents of the all risks and hazar absolve and agree supervisors, and the	ds incidental to to hold harml	o such parti ess the Villa	cipation includ	ing transportatio	n, if any. We d	lo hereby waive, r	elease,
SIGNED:		CLEARLY PRINT NAME:					
						T SIGNATURE***	
I would like to I cannot coad				e you certified?	Yes	_No	
NAME ON CHECK				CHEC	K NO	AMOUNT	

## ONLY CERTIFIED COACHES WILL WORK WITH THE PLAYERS

ANY QUESTIONS, CALL (201) 641-4950 ext. 610 or <a href="www.ridgefieldpark.org">www.ridgefieldpark.org</a> or email <a href="boardofrec@ridgefieldpark.org">boardofrec@ridgefieldpark.org</a>

REGISTRATIONS RECEIVED AFTER SEPTEMBER 26, FEE IS \$75 each child – no discounts on late registrations.

PLEASE NOTE \*\*\*\*\*NO REGISTRATIONS ACCEPTED ON EVALUATION NIGHT\*\*\*\*\*

REGISTRATION CLOSES ON OCTOBER 25 NO CASH ACCEPTED AT CLERK'S OFFICE

Special requests for players on certain teams cannot be honored if itmay upsetthe competitive balance of the teams
THE VILLAGE CHARGES \$25 FEE FOR RETURNED CHECKS
PLEASE TURN OVER AND FILL OUT MANDATORY INSURANCE SECTION

<b>Personal Insurance Information:</b> Name of Insurance Company:_	
Name of Insured:	
Address of Insurance Company:	
Telephone No. of Insurance Company:	(COPY OF CARD MUST BE ATTACHED)
List any medical conditions:	
I am unaware of any medical conditions for participant.	

PLEASE NOTE, YOU MUST FIRST GO THROUGH YOUR PERSONAL INSURANCE COMPANY. THE VILLAGE IS THE SECONDARY INSURANCE. VILLAGE INSURANCE WILL ONLY PICK UP WHAT YOUR PERSONAL INSURANCE DOES NOT FOR SERVICES THAT ARE CUSTOMARY AND REASONABLE (USUALLY DEDUCTIBLE AND/OR CO-PAYS). IF YOU HAVE AN HMO, YOU MUST GO THROUGH YOUR HMO CARRIER. IF NOT, ONLY 50% OF THE BILL WILL BE PAID. INJURY CLAIM FORM MUST BE SUBMITTED TO THE BOARD AND THE INSURANCE COMPANY WITHIN 60 DAYS EVEN IF IT IS JUST NOTIFICATION AND NO BILLS. IT IS YOUR REPONSIBILITY TO PUT THE INSURANCE CARRIER ON NOTICE EVEN IF YOU ARE WAITING FOR DOCTOR BILLS/EXPLANATION OF BENEFITS FROM THE INSURANCE CARRIER.

RIDGEFIELD PARK BOARD OF RECREATION 234 MAIN STREET RIDGEFIELD PARK, NJ 07660 Voicemail (201) 641-4950 EXT. 610

Info on activities: <a href="www.ridgefieldpark.org">www.ridgefieldpark.org</a>
Email: <a href="mailto:boardofrec@ridgefieldpark.org">boardofrec@ridgefieldpark.org</a>