



2021



Adult Mens & Womens Basketball

This is a team registration form. If you would like to sign up individually or have questions please contact Stephen Kostoff at 863-2447 or skostoff@cityofwhitefish.org

Team Registration Form

**Ages:
16+**

**Team Fee: \$350
When: Monday & Wednesday Nights
@ Muldown Elementary**

**SEASON
Runs:
Oct 25 -
Dec 1**

Pay at City Hall before first game Make Checks Payable to:
City of Whitefish

Team Name: _____

Captains Info:

Name: _____

Phone: {home} _____ {cell/work} _____

Address: _____

City/State: _____ Zip: _____

Email: _____

I, as an adult 18 and older, or the parent or legal guardians of the above named participant, hereby give my approval to participation in the activity described above. I assume all risks and hazards incidental to the conduct of the activities and transportation to and from the activities.

Further, I hereby release, absolve indemnify and hold harmless the City of Whitefish, Whitefish School district, the organizers, sponsors, supervisors, representatives, employees and any or all of them for any injuries I may or my child may sustain as a participant in these activities. Participants are involved at their own risk. Registration fees paid do not provide for insurance.

Further, I hereby grant authority to a qualified doctor to render such treatment as deemed necessary under the circumstances.

SIGNATURE: _____ DATE: _____

