



# Garden City Basketball 2024-2025 Boys & Girls Application

**preK-K-1-2 grade clinic  
is held at St Paul's  
Sundays 12:30-2:15pm  
Season begins December 1, 2024 and runs  
through March 2, 2025**

**Registration Deadline is November 15, 2024**

Please REGISTER ONLINE at our website:

[www.gardencitybasketball.org](http://www.gardencitybasketball.org)

If you do not wish to register online;  
Please complete this application, make your check payable to "Garden City Basketball" and mail to:

Garden City Basketball  
c/o Sean Skramko  
176 Wellington Road  
Garden City, NY 11530-1218

Player's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Grade: (please circle) pre-K / K / 1<sup>st</sup> / 2<sup>nd</sup>

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Registration Fee: \$150**

**Please consider offering an additional tax deductible donation of \$25 or more.**

This is a clinic where the focus is on skill development and fun. There are no teams and participants are not called.

Garden City Basketball is a New York State incorporated tax exempt non-profit organization. We are proud members of AAU, the Junior NBA, and the Junior WNBA. Please visit the [www.GARDENCITYBASKETBALL.org](http://www.GARDENCITYBASKETBALL.org) website for information about our program.



### Parental Consent and Liability Waiver

I desire for my (self/son/daughter) to participate in the Garden City Basketball clinic. I understand that basketball involves physical contact between players and I assume all risks associated with (my/his/her) participation. (I/My child) (have/has) no known medical conditions which prohibit participation in this sport. I agree to hold harmless and release Garden City Basketball and their agents and sponsors from legal liability resulting from any injuries and illness sustained during participation in these activities. I assume the risks to exposure to and potential illness from infectious diseases and illnesses, including, without limitation, flu, viruses, and any other illness. By signing below, I agree that to the fullest extent allowed by law, I accept all possible risks and will hold Garden City Basketball, its owners, members, officers, affiliates and employees harmless from any claims due to exposure to or contracting of an infectious disease. I understand Garden City Basketball cannot be responsible for loss or damage to (my/my child's) personal possessions. Participation is subject to the rules and regulations of Garden City Basketball and any other organization (such as the Village of Garden City) which this program is a member/affiliated with. Participation may be revoked with or without cause by the Board of Garden City Basketball.

**Dated:** \_\_\_\_\_ **Signature:** \_\_\_\_\_