

CITY OF GLEN COVE  
PARKS AND RECREATION DEPARTMENT PRESENTS

# "UNDER THE LIGHTS"

## **SUMMER BASKETBALL LEAGUE**

AT

STANCO PARK (GEDDE'S) BASKETBALL COURTS

FOR BOYS AND GIRLS  
ENTERING GRADES 3 THRU 8 IN SEPT. 2019

TUESDAY & THURSDAY EVENINGS  
(RAIN MAKE-UPS ON FRIDAYS)

JULY 9<sup>th</sup> TO AUGUST 8<sup>th</sup>  
SESSIONS ARE HELD FROM 6 PM – 8 PM  
BASED ON TEAM SCHEDULE



SCHEDULES WILL BE MAILED HOME THE WEEK OF 7/01/2019

SESSIONS WILL CONSIST OF WARM-UPS/SHOOT-A-ROUND,  
FOLLOWED BY GAMES OF TWO 15 MINUTE HALVES

\*LEAGUE STRUCTURE\*, IF ENOUGH PLAYERS ARE REGISTERED

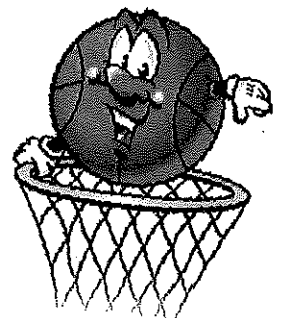
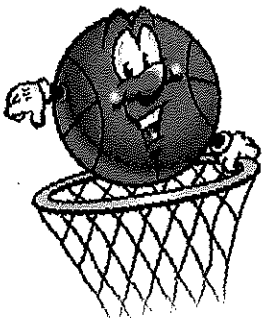
\*ONE OFFICIAL PER GAME\*

\*GIRLS SESSIONS WILL INCLUDE ½ HOUR CLINIC AND ½ HOUR PLAY  
FOR THE FIRST FEW SESSIONS

REGISTRATION FEE OF \$50 PER CHILD  
INCLUDES T-SHIRT & OFFICIALS FEES

REGISTRATION DEADLINE: JUNE 21, 2019

JOIN THE FUN!



Timothy Tenke  
Mayor



Phone: (516) 676-2000  
Fax: (516) 676-0108  
www.glencove-li.us

## CITY OF GLEN COVE

City Hall  
9 Glen Street  
Glen Cove, NY 11542-4106

### WAIVER, RELEASE AND INDEMNIFICATION

The undersigned acknowledges the rules and regulations for participation in the City of Glen Cove "Under The Lights" Basketball program, and agrees to abide accordingly. In consideration of being permitted to use the City of Glen Cove basketball facilities, the undersigned agrees that neither the City of Glen Cove, nor any of its affiliates, nor any employees shall be liable on account of any claim arising out of personal injury, personal property, illness or death during participation in the City of Glen Cove "Under The Lights" Basketball League.

Further, by signing this waiver, the undersigned waives, releases and discharges any and all claims, whether anticipated or unanticipated, including without limitation claims based on acts of the City of Glen Cove or any affiliates, any employee or agent of the City of Glen Cove or any other user of the facilities, which the undersigned or the heirs, executives, administrators or assigns of the undersigned might have against any or such person on account of any personal injury, illness or death suffered by the undersigned and the undersigned will exonerate, indemnify and hold harmless the City of Glen Cove and all of its respective employees and agents, from and against any and all claims asserted by the undersigned or any such third person of the undersigned on account of any such personal injury, illness or death suffered by the undersigned.

\_\_\_\_\_  
Player's Signature

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Player's Name (please print)      Date

\*\*\*\*\*

**Please complete registration form and waiver and return along with your payment to:**

Glen Cove Parks & Recreation, 9 Glen Street, Glen Cove, NY 11542 or drop off in Room 206 at City Hall during business hours. Checks should be made payable to the City of Glen Cove

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Birth Date \_\_\_\_\_ Grade in Sept 2019 \_\_\_\_\_ Parent's email \_\_\_\_\_

T-Shirt Size: Youth Lg \_\_\_\_\_ Adult Sm \_\_\_\_\_ Adult Med \_\_\_\_\_ Adult Lg \_\_\_\_\_ Adult XL \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Phone # \_\_\_\_\_

*For further information, please call 516-676-3766, or  
e-mail [kfoster@cityofglencoveny.org](mailto:kfoster@cityofglencoveny.org)*