



Portland High School Youth Basketball League  
 600 College Street, Portland, TN 37148  
 Phone: (615) 325-9201

# 2018-2019 Youth Basketball League

## Player Evaluations Tuesday, November 6<sup>th</sup> at 6:00 pm at Portland High School

**Early Bird Registration Fee:** \$70

**After Nov. 15 Fee:** \$80

**Early Bird Registration**

**Registration Deadline:** Nov. 15 by 4:00pm

**Deadline:** Tuesday, Nov. 6, 2018

Youth basketball registration form on reverse side. Additional forms may be obtained on the PHS website.

### **Grades: Kindergarten – 6<sup>th</sup>**

The Portland Youth Basketball League is designed to provide children with the opportunity to play basketball in a structure environment. The mission of this program is to provide a fun experience where sportsmanship and teamwork are emphasized. League games are held at Portland High School on Corey Brewer court. Games will be played in December and January. All players will receive a purple/white reversible jersey and purple shorts.

#### **League Divisions**

Boys and Girls Divisions

K-2: Age 5-7    **\*\*League administrators  
 3-4: Age 8-9    reserve the right to change  
 5-6: Age 10-12 divisions and ages.**

#### **Coaches**

Coaches are chosen on a voluntary basis. If interested, Please contact Coach Steinbrecher or Coach Travis.

Email: [scott.steinbrecher@summerschools.org](mailto:scott.steinbrecher@summerschools.org)

Email: [Darryl.travis@summerschools.org](mailto:Darryl.travis@summerschools.org)

**\*\*Coaches will be required to attend a coaches clinic.**

### **League Details**

**PLAYER DRAFT:** A player draft will take place on November 6<sup>th</sup>. All players must attend. Evaluations will be from 6:00 pm -7:00 pm at Portland High School.

**GAMES:** All games will be played on Saturdays. Games will be on the following dates: Dec. 1<sup>st</sup>, 8<sup>th</sup>, & 15<sup>th</sup>, Jan. 5<sup>th</sup>, 12<sup>th</sup>, 19<sup>th</sup>, & League Tournament on the 26<sup>th</sup>. K-2<sup>nd</sup> will play at 9:00; 3<sup>rd</sup>-4<sup>th</sup> will play at 10:00; 5<sup>th</sup>-6<sup>th</sup> will play at 11:00. **\*\*Game administrators reserve the right to change game times as needed for PHS Basketball games and Inclement weather.**

**GAME FORMAT:** Games will be: K-2<sup>nd</sup> will be 4 – 6 minute quarters and 3<sup>rd</sup> – 6<sup>th</sup> will be 4 – 8 minute quarters. Each team will get 2 time outs a half. Each player will be required to play 2 quarters. Overtime will be 2 minutes.

**UNIFORMS:** The visiting team on the schedule will wear purple, and the home team will wear white.

**SEATING FOR SPECTATORS:** Seating for spectators will be in the upper gym bleachers. No lawn chairs are allowed on the basketball floor. Only coaches and players are allowed in the downstairs gym. All water bottles must have a lid that will close.

**\*\*\*Please be courteous and respectful to all coaches, officials, and clock keepers.\*\***

**PORTLAND YOUTH BASKETBALL  
REGISTRATION FORM**

Players Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Parent/Guardian's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Grade: \_\_\_\_\_

**PLEASE CIRCLE PROPER CHOICES BELOW**

Boy	Girl	Grade: K	1	Player shirt size:	Youth Small	Youth Medium
		2	3		Youth Large	Adult Small
		4	5		Adult Medium	Adult Large
		6			Adult X-Large	Adult XX-Large

**I would like to volunteer as (please circle):    Head Coach            Assistant Coach**

**Head Coach Shirt Size...Ad S, Ad M, Ad L, Ad XL, Ad XXL**

My child has medical restrictions which their coach should be aware of. Yes \_\_\_\_\_ No \_\_\_\_\_  
(Asthma, epilepsy, diabetes, etc.) If yes, please explain \_\_\_\_\_

**Fees to accompany form:            \$80.00 for one child, \$150.00 for two, \$220.00 for three**  
***This fee includes Uniform***

**INSURANCE WAIVER**

I have insurance that covers my child to participate in the Portland Youth Basketball League program. Insurance Company Name \_\_\_\_\_  
If I do not have insurance for my child, nor do I wish to obtain insurance for my child, I know that it will be my full responsibility for any medical expenses incurred.

**PARENTAL CONSENT AND WAIVER OF LIABILITY**

I consent to, and give permission for, my child to participate in the Youth Basketball Program. I have no knowledge of any physical impairment that would be affected by my child's participation in the basketball program. I further agree to waive all liability of the Portland Youth Basketball Program, its representatives, employees, Managers, team coaches, School District and any other participant, for any accident, injury, illness or other mishap which might befall the individual named on this registration while traveling to or from, or during their participation in the basketball program, whether or not such liability, claim, damage, loss or expense is caused in part by the negligence of any person, including any negligence by or on behalf of the Basketball Program, its agents and specifically including any defects in the condition of the property of the Basketball Program or the condition of its maintenance. I consent (yes \_\_\_ or no \_\_\_) to emergency medical care for my child in case of sickness or injury, and any actual charges made for such care. I agree to abide by the rules and regulations as set forth by the Basketball Program for my child's participation, and that each player will be responsible for himself, his insurance and his equipment. I acknowledge that I have freely and voluntarily entered into this Agreement and that I have read and understand this agreement in its entirety.

I hereby give my consent for my child's picture to be taken and used for advertisement and awards purposes. (Initials \_\_\_\_\_)

I hereby give my consent for the above child to participate in the Portland Youth Basketball Program.  
Date \_\_\_\_\_ Signature of Parent or Legal Guardian \_\_\_\_\_

**Please return form and check made payable to Portland Youth Basketball League  
on or prior to November 15, 2018**