

Registration Information

Programs run Saturdays

Learn the FUNdamentals of basketball - dribble, pass and shoot through progressive skill development, role playing and active participation. This program is designed for beginners to intermediate. Come show off your skills while learning from the best Midtown Tigers Coaches in the area!

Mini Basketball (K - Gr. 3)

Gr. 2 - 3 Co-ed: 9:00 am - 10:00 am

#223752

K - Gr. 1 Co-ed: 10:30 am - 11:30 am

#223756

Fastbreak Basketball (Gr. 4 - Gr. 7)

Gr. 4-7 Girls: 2:15 pm - 3:15 pm

#223754

Gr. 4-7 Boys: 3:30 pm - 4:30 pm

#223755

Registration Information

In Person

Mount Pleasant Community Centre

1 Kingsway, Vancouver, BC, V5T 3H7

Over the Phone

Mount Pleasant Community Centre

604-257-3080 (ext. 1)

Online

City of Vancouver Website

<https://ca.apm.activecommunities.com>

Mini Soccer 2019

Saturdays @ Memorial Field or Robson Park

Ask your coach for more information

For more information on Moresports, please visit: www.moresports.org

PARTICIPANT INFORMATION (*please complete)

Player Information

First Name:			
Last Name:			
Address:			
Postal Code:			
School:			
Birth Date:			
Sex:	<input type="checkbox"/> M	<input type="checkbox"/> F	Age: <input type="text"/>
Grade:	<input type="text"/>		
Name of Legal Guardian:			
Phone #:			
E-mail:			

Programs

Please check off which program(s) you are registering for:

- | | | | |
|--------------------------|----------------------------|--------------------|---------|
| <input type="checkbox"/> | Gr. 2-3 Basketball (Co-ed) | 9:00 am -10:00 am | #223752 |
| <input type="checkbox"/> | Gr. K-1 Basketball (Co-ed) | 10:30 am -11:30 am | #223756 |
| <input type="checkbox"/> | Gr. 4-7 Basketball (Girls) | 2:15 pm - 3:15 pm | #223754 |
| <input type="checkbox"/> | Gr. 4-7 Basketball (Boys) | 3:30 pm - 4:30 pm | #223755 |

Program Fee - \$35 (or Pay What You Can)

- Cash: \$ _____
- Cheque: \$ _____ (Payable to **City of Vancouver**)

PERMISSION TO UTILIZE PHOTOS AND TESTIMONIALS

I hereby authorize Midtown Moresports staff to photograph and/or otherwise record images and/or sounds of or including the Child while he or she participates in the activities described above and to publish and otherwise make use of as they wish, without compensation to the Child or anyone else, all such photographic images and other recordings of the Child for purposes of documenting and promoting Moresports programs and services. Examples include: use in program brochures, on photo displays, and through Moresports web postings and videos. I understand that names or any other information regarding the identification of the Child would require additional consent.

Yes

No



Ask us about out other programs - Handball on Tuesdays and Basketball on Fridays.

PARENT/GUARDIAN CONSENT FOR PARTICIPATION AND ACKNOWLEDGEMENT OF RISK FOR CHILD



I, the Parent/Guardian of the Child, understand and accept that, in respect of the Child's participation in the Activity, it is my responsibility to:

- 1) Understand the risks, dangers, hazards and consequences of injury in the activity.
- 2) Determine, taking into consideration those risks and the Child's behavioral characteristics, physical health and abilities, whether the Child should be allowed to participate in the activity.
- 3) Ensure that the Child is appropriately covered by medical insurance for any harm occurring in the activity.
- 4) Provide emergency medical information regarding the Child as required in this document.
- 5) Support the Child by remaining on site, or designating another adult, to attend to the Child's needs if required.

Signature of Parent/Guardian: _____

Date: _____

EMERGENCY INFORMATION AND MEDICAL CONSENT



I hereby authorize the Moresports Mini Soccer program, in the event of an emergency, to administer first aid to the Child and transport or arrange emergency transportation of the Child to a medical facility for medical treatment.

Child's Name: _____

Child's date of birth (day/month/year) _____

Emergency Contacts:

(1) Full Name: _____ Relationship to Child: _____

Phone Number: (H) _____ (C) _____

(2) Full Name: _____ Relationship to Child: _____

Phone Number: (H) _____ (C) _____

Medical or behavioral concerns staff should be aware of:

NOTE: Please include allergies, life threatening conditions, disabilities, or extra assistance if required. This information helps staff determine if we can reasonably accommodate your child.

JUMPSTART INFORMATION CONSENT



By signing this document I, the Parent / Guardian of

_____ (child's name):

Authorize Canadian Tire Jumpstart Chapters to consult with the Vancouver School Board, the Community Schools Team, Moresports, or the Vancouver Park Board to share my child's first name, last name, birth date, gender, and postal code with the organization that will receive the payment for my child's registration in this program.

First name, last name, birth date, sex, and postal code are requirements of Canadian Tire Jumpstart and are submitted electronically as part of the requirement for funding. All personal information is secured and protected and will not be used for any other purpose than reference to the funding provided. Canadian Tire Jumpstart and its members will respect the confidentiality of all applicants.

Parent/Guardian Signature: _____

Date: _____

Moresports

Presents



SPRING 2019

Basketball Edition

Saturdays, April 13th – June 1st 2019

(No Program: April 20th 2019)

LOCATION

McBride Elementary School

1300 E 29th Ave, Vancouver, BC V5V 2T3

PARTNERS AND FUNDERS:

