

Olathe Activities Department

Basketball

Grades: K-6th

ALL REGISTRATIONS NEED TO BE TURNED INTO TOWN HALL

Divisions:

K-2nd Coed
3rd & 4th Grade Girls
3rd & 4th Grade Boys
5th Grade Girls
5th Grade Boys
6th Grade Girls
6th Grade Boys

Registration Fee:

\$40

Registration Deadline

November 28th

**If there are not enough
participants registered or
coaches by the deadline that
division will be cancelled!**

**Exact time and days for practices will be determined
by the Coaches. Please wait for the Coaches to contact
you with practice information**

Games will be played on Saturdays beginning January 12th

**Olathe
Activities
Department**

activities@olatheco.us

TOWN OF  **OLATHE**

Olathe Activities Department
 PO Box 789 - 419 Horton Ave.
 Olathe, CO 81425
 activities@olatheco.us



Parent/s _____ Main PH# _____

Email: _____ Cell PH# _____ Is it ok to receive text messages: Y / N

Mailing Address _____

Emergency Contact other than Parent: _____ PH# _____

Participant	Age	Grade	M/F	Activity	Fee

Picture Release - OAD would like to use your child's photo for promotional info/websites.
 Initial here _____

Shirt Size: YXS YS YM YL
 AS AM AL AXL

I would be interested in coaching or assistant coaching: _____

I would be interested in sponsoring a team for \$250: YES / NO

Business name _____

Contact person _____ Phone # _____

I, the below signed as an adult or parent of, do hereby release the Olathe Activities Department, its charges, employees, and volunteers, the Olathe Schools and Montrose County School District, the Town of Olathe or its employees from liability for any injuries or damages which may result to myself or my child as a result of the participation of myself or my child in the Olathe Activities Department Program or transportation to and from such programs. Further, the applicant agrees to save and hold harmless the Town of Olathe, its officers, agents, or employees, for any damages or personal injury which may result from activities occurring on the property being used by the Olathe Activities Department.

PLEASE SIGN HERE

Parent Signature _____ Date _____

Please mail or return to :

Olathe Activities Department @ Town Hall
 NEW - After Hours Drop Box @ Town Hall

Office use only

Amount \$ _____ Date _____

Cash _____ Check # _____