



# Bayou Area Basketball Association 2023 SPRING/ SUMMER Season Registration Form

Registration Fee: \$55.00

Payable at City Hall OR online at [www.CityOfBayouLaBatre.com](http://www.CityOfBayouLaBatre.com)

PAY REGISTRATION FEE TO City Hall or remit online  
by MONDAY, May 1, 2023 at 6 p.m.

A copy of your PAID REGISTRATION FEE must be turned in with your registration forms.

13785 South Wintzell Avenue ~ Bayou La Batre, AL 36509

251-824-2171 Monday – Thursday 7 a.m. to 6 p.m.

**ONLY a PARENT or LEGAL GUARDIAN my fill out, and sign this form on behalf of a child.**

2023 SPRING Age Group GOALS

8-U= 6, 7, 8      10-U= 9, 10

12-U= 11, 12      14-U= 13, 14

ATTACH COPY OF INSURANCE CARD \_\_\_\_\_

Player Legal Name: (First, Middle, Last) \_\_\_\_\_

Preferred to be called \_\_\_\_\_ Age on JANUARY 1, 2023 \_\_\_\_\_

Age Now \_\_\_\_\_ Birthday \_\_\_\_\_ Male / Female (Circle One)    Height \_\_\_\_\_ Weight \_\_\_\_\_

Grade \_\_\_\_\_ School Currently Attending: \_\_\_\_\_

Parent's Name: (First, Middle, Last) \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Parent or Legal Guardian (please circle one)

Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

**(Emergency contact should be someone DIFFERENT that the parent listed above)**

\*\* Please indicate how you will pay registration fee (choose one)    PAY ONLINE \_\_\_\_\_    PAY AT CITY HALL \_\_\_\_\_

## SHIRT SIZE ~ Please circle ONE

YOUTH ~ Small Medium Large ~ ~ ~ ~ ADULT ~ Small Medium Large XL XXL

## SHORT SIZE ~ Please circle ONE

YOUTH ~ Small Medium Large ~ ~ ~ ~ ADULT ~ Small Medium Large XL XXL

**INITIAL ON THE LINE BELOW THAT SIZES CHOSEN ARE CORRECT.**

**replacements ordered are at the cost of the parent or guardian.**

\_\_\_\_\_

PLAYER NAME:

PLAYER DATE OF BIRTH:



## Bayou Area Basketball Association

### Insurance, Consent for Treatment and Waiver Form 2023 Spring/Summer Season

#### A. MANDATORY Insurance Coverage

Beginning June 2, 2022, the City of Bayou La Batre requires proof of health insurance for any child playing sports with a City of Bayou La Batre sponsored sports program. **This insurance requirement is mandatory. No exceptions will be made.** The City of Bayou La Batre, its facilities, grounds, associates, officials or any other associated parties will not assume financial or another legal responsibility for injuries received while participating in special events, practicing, or playing games at The Bayou La Batre Community Center for the Bayou Area Basketball Association.

Please initial along the following statement to verify the understanding of the mandatory health insurance requirement.

\_\_\_\_\_ I understand that my child must be covered by medical insurance in order to play sports with/ under a City of Bayou La Batre sponsored sports program. Along with my child's insurance coverage, I will be responsible for any and all medical expenses incurred as a result of an injury my child receives as a result of participation in basketball activities while participating in the Bayou Area Basketball Association program. If insurance coverage for my child changes I will provide a copy of the new insurance card/coverage immediately . I understand that if the health insurance information provided shows the coverage date ending during the practice or playing season of this sport, my child will be unable to participate until a new proof of coverage is provided to a representative of the Bayou Area Basketball Association.

#### B. Consent For Treatment

\_\_\_\_\_ In the event of an accident and neither I nor my designated emergency contact can be reached in reasonable attempts, I hereby give my consent for emergency transportation to be called if needed and for emergency treatment to be given at the nearest hospital if no preferred hospital is listed below or the preferred hospital is on diversion.

PREFERRED HOSPITAL \_\_\_\_\_

Please list the child's primary care physician below

Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Dentist: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ I DO NOT give my consent for emergency medical treatment if I can't be contacted. In the event of a serious injury, I want the Greater Bayou Area Basketball Association to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### C. Waiver

In consideration of your accepting this registration, I hereby, for myself, my heirs, executors, and administrator, waive and release and all rights and claims I may have against the City of Bayou La Batre and the Greater Bayou Area Basketball Association, for any of their officials for all damages and injuries suffered by me or participating child while participating in the program

Parent/ Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Player Name _____
Age _____ 2023 Spring/Summer Season

Bayou Area Basketball Association – BABA  
Parent/Guardian and Player Code of Conduct

**One form must be signed for each player who participates in the BABA Basketball Program.**

**PARENT/ GUARDIAN CODE OF CONDUCT**

- *I will encourage good sportsmanship by demonstrating positive support for all players, coaches, and officials at every game, practice or other youth event associated with BABA.*
- *I will place the emotional and physical well-being of my child or other players ahead of any personal desire to win.*
- *I acknowledge and appreciate players’ growth toward maturity, teamwork, and sportsmanship. I will assist in their effort toward establishing stronger relationships with teammates, coaches, and within themselves.*
- *I will affirm my child and their teammates when good character, healthy sportsmanship, and other positive behaviors and actions are displayed. I will not affirm only their athletic performance or a victory.*
- *I will serve as a role model for our players, talking politely and acting courteously toward coaches, officials, other parents, visiting team parents, and spectators at practices, games and meetings.*
- *I will be a model good sportsmanship. I can show this by acknowledging and applauding the efforts of not only their team members, but their opponents. I can accept defeat graciously by congratulating the members of the opposing team on a game well played.*
- *I will encourage my child and his teammates with positive statements, even when they make mistakes. At every practice, I understand children are growing physically in their skills, developing character, and emotionally growing by building confidence. At every practice I understand children are learning teamwork and sportsmanship.*
- *I will treat other players, coaches, officials, and fans with respect and courtesy regardless of race, sex, creed, and abilities. I will ensure my child understands to treat others how you would like to be treated.*
- *When problems or questions arise, I will bring my concerns to the appropriate people who can make decisions and/or take actions such as a Coach, BABA Board Member or Community Center Representative.*
- *Because I am a parent with the power and platform to make a positive difference in the life of every player, I commit to this code of conduct. When failing to act or live up to these standards, I will allow for accountability and take responsibly for my actions. I understand that unsportsmanlike and/or unprofessional behavior shown by myself or my child may result in suspension or full dismissal of visitor admission privileges, game and/or practice suspensions, and possibly my child being dismissed from the BABA program. I understand that any admission fee and/or registration fees paid will not be reimbursed if I or my child is dismissed for unbecoming or unsportsmanlike behavior and/or actions.*

\_\_\_\_\_ Signature \_\_\_\_\_ Date

**PLAYER CODE OF CONDUCT**

- *I accept responsibility for my behavior while at practice, at games and during BABA events. I understand that what I do and say affects my teammates, other teams, and other people around me either positively or negatively.*
- *I will respect the facility that I practice, and play games at. I will not enter areas where I am not permitted to be. I will not cause damage to, nor take property that isn’t mine. I will alert an adult if I see property of others being misused, taken or vandalized. I will alert an adult if other people are in areas of the building that they should not be in.*
- *I act with respect toward myself and the people and things around me, including my parents and/or my guardian, my coaches, my teammates, BABA staff, my opponents, and the spectators. I will alert an adult if I see someone else being treated unkindly or being bullied.*
- *I will treat other players, coaches, officials, and fans with respect and courtesy regardless of their differences. I will judge people by their good character and the kindness shown to me.*
- *I understand I can serve as a role model at all times by talking politely and acting courteously toward coaches, teammates, opponents, officials, and spectators. I understand that it is a privilege to play in the BABA program and to represent my family, school, and community as an athlete.*
- *I will give 100 percent effort to practices, games, and events. I understand that my effort demonstrates my commitment to the team and my respect for my coaches and teammates.*
- *I will display good sportsmanship. I acknowledge and applaud the efforts of others. I encourage my teammates with positive statements. I can accept defeat graciously by congratulating my opponents on a game well played.*

\_\_\_\_\_ Signature \_\_\_\_\_ Date