

2016 GIRLS S.W.I.S.H. BASKETBALL LEAGUE

(S.W.I.S.H. – Skagit, Whatcom, Island, Snohomish Hoops)



★★ THE BEST GIRLS BASKETBALL ★★

★★ PROGRAM IN THE AREA ★★



- ➔ **Games begin Saturday, October 22nd with Seeding Games. Registrations are requested by October 3rd. Late registrations will be accepted only if space is available.**
- ➔ **Separate Divisions of Play for 5th/6th, 7th, & 8th Grade Girls**
- ➔ **NOTE:** Teams and players are allowed to “PLAY UP” in grades/divisions if they have the necessary skill level.
- ➔ **Rosters:** Minimum number of players on a team is recommended at eight, with a maximum of twelve.
- ➔ **Team Entry Fee: \$670.00 (Includes an 11 game guarantee)**
- ➔ **Individual Entry Fee: \$95.00** Sales Tax Included in BOTH fees!
Individuals will be placed on teams based on Skagit Co. community and/or school.
- ➔ **Games will be played on Saturday’s at various sites within Skagit County**
- Mount Vernon, La Conner & Sedro Woolley
- ➔ **All teams are required to have an adult coach on the bench at all times.**
- ➔ **Uniforms:** All teams are required to wear same color and numbered jerseys (front or back).



All participants must complete and turn in a registration & concussion form with parental consent prior to participating in any practice and/or game. Team entries should turn forms in together.

Cut ✂ Here

2016 Girls S.W.I.S.H. Registration Form – INDIVIDUAL & TEAM

In consideration of your accepting my entry, I hereby for myself, my child or children when applicable, my heirs executors and administrators waive and release any and all rights and claims for damages I or my child(ren) may have against Skagit County through Skagit County Parks & Recreation and its representatives, successors or assignees for any and all injuries suffered by myself or my child(ren) while going to, participating in, or returning from this activity. I have read this statement and my signature below verifies mine and my child’s acceptance of these conditions.

Participants Name: _____ Phone(s): _____

Parent Name: _____ Parent Signature: _____

Address: _____ City, Zip: _____

E-Mail: _____ School &/or Last Year’s Team: _____

Grade (circle one): 5th 6th 7th 8th Individual Reg. Team Reg. Birth date: ____/____/____

Adults, please check if interested in: Coaching _____ Assisting _____ Refereeing _____

Send Registration & Fee to: Skagit County Parks & Recreation
P.O. Box 1326 360-416-1350
Mount Vernon, WA 98273 parksrec@co.skagit.wa.us



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