



TOWN OF HUDSON
PARK COMMISSION
Division of Recreation
78 Main Street
Hudson, MA 01749
P: 978-568-9642
F: 978-562-8508
www.hudsonrecreation.org



CENTRAL MASS YOUTH BASKETBALL LEAGUE Competitive Travel Basketball Team Evaluations (OPEN TO HUDSON RESIDENTS ONLY)

This is a competitive program and it is mandatory that all travel team players participate in the Recreation Instructional Youth Basketball Program, with the exception of 8th graders.

A Player Evaluation Info Form (see page 2) and Signed Waiver (see page 3) and must be submitted prior to a player participating in an evaluation. All forms will be available for completion at the evals, however we recommend you visit our website ahead of time to print and complete the required documents. All forms are to be turned in at the evals to the Recreation Staff and must be completed by a parent or guardian. Please be sure to arrive 10-15 minutes earlier than your child's scheduled evaluation in order to submit all paperwork.

In order to be considered for a team, players MUST attend at least 1 evaluation. However, we recommend, that interested participants must make every attempt to attend ALL evaluations for their grade level listed below.

GIRLS Evaluations

LOCATION:	CA Farley Elementary School - Gymnasium	
Girls Grade 5	6:00 pm – 6:40 pm	October 6 th and 8 th
Girls Grade 6	6:45 pm – 7:25 pm	October 6 th and 8 th
Girls Grade 7	7:30 pm – 8:10 pm	October 6 th and 8 th
Girls Grade 8	8:15 pm – 8:55 pm	October 6 th and 8 th

BOYS Evaluations

LOCATION:	CA Farley Elementary School - Gymnasium	
Boys Grade 6	6:00 pm – 6:40 pm	October 5 th , 7 th , and 9 th
Boys Grade 8	6:45 pm – 7:25 pm	October 5 th , 7 th , and 9 th
Boys Grade 5	7:30 pm – 8:10 pm	October 5 th , 7 th , and 9 th
Boys Grade 7	8:15 pm – 8:55 pm	October 5 th , 7 th , and 9 th

The rosters of players chosen for the league will be posted on our website on Wednesday, October 21st after 6:00 pm. www.hudsonrecreation.org

FEE: \$150.00 per child
(Must be paid in full by November 6th)

Central Mass Youth Basketball League games are played on **SUNDAYS**. This year's regular season may begin as early as Sunday, November 22nd and continue until early March 2016. Coaches may also choose to enter their teams in a number of tournaments throughout the course of the season.

Additional fees will be charged for tournaments and all players are expected to participate.



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2015-2016 Hudson Travel Basketball - Player Info Form

Note: This form will be used for informational purposes only and will not be used as part of player evaluations.

Child's Name: _____ Date of Birth: ____/____/____

Address: _____

City/Town: _____ State: _____ ZIP: _____

Participant's Grade level (as of Sept. 2015): 5 6 7 8

Participant's School (as of Sept. 2015): **QUINN MS** **HUDSON HIGH** **OTHER**

Please list any physical disabilities, allergies or conditions that may restrict participation:

Emergency Contact's Name: _____

Emergency Contact's Relationship to Participant _____

Emergency Contact's Address: _____

Emergency Contact's Phone: _____

Please list the names and emails of any parent that is interested in coaching:

Name(s): _____

Email(s): _____

Are you interested in coaching (circle one):

Travel Team (CMYBL)

Instructional Youth Basketball (Rec)

Both CMYBL/Rec

Please have your child submit this completed form when they arrive at their first evaluation along with a signed waiver (see next page).

**Town of Hudson
Park Commission/Division of Recreation**

Participant Consent and Release Form

In consideration of this application, and any subsequent registration thereunder Participant and such Participant Parent or Guardian, when applicable, does hereby consent to participation in voluntary athletic and/or recreation programs conducted and administered by the Town of Hudson, its Park Commission and Division of Recreation.

Participant and/or Parent/Guardian, ("as Releasor"), does hereby forever release, discharge and hold harmless the Town of Hudson, its Park Commission and Division of Recreation and their representatives, employees, officers, agents, board members, volunteers and any other individuals or organizations associated with them as to such programs, assisting or participating in such voluntary athletic or recreation programs of the Town of Hudson, its Park Commission and Division of Recreation, ("the Releasees"), from any and all liability, claims, demands, obligations, rights of action, causes of action, costs, expenses and resulting Attorney's fees of whatever kind or nature, either in law or in equity, which arise or may hereafter arise in the future, directly or indirectly from participation in such voluntary athletic or recreation programs.

Releasers acknowledge and understand that this form releases the Releasees from any liability or claim that Releasers may have for themselves, their heirs, successors and assigns, with respect to any bodily injury, personal injury, illness, death or property damage that may result from participations in voluntary athletic or recreation programs or activities.

Releasers further acknowledge, understand and agree that the Town of Hudson does not assume nor accept any responsibility for or obligation to provide financial assistance, or other assistance, including by not limited to, medical, health or disability insurance, in the event of injury or illness.

Further, as to medical treatment, Releasor(s) do hereby release and forever discharge the Releasees from any claim whatsoever, which arises or may hereafter arise on account of any First Aid, treatment or service rendered in connection with such voluntary athletic or recreation programs offered by the Town of Hudson, its Park Commission and Division of Recreation.

In furtherance of the foregoing and not in limitation thereof, Releasers also promise to indemnify, defend and hold harmless the Releasees against any and all legal claims or proceedings of any nature and description that may have been asserted in the past or may be asserted in the future, directly or indirectly, arising from any personal injuries to Releasers from Participant, with such voluntary athletic or recreation programs.

Releasor(s), further affirm that we have read this consent and release form and that we understand it's content and that we have been afforded the opportunity to have a Lawyer review it. We understand that participation in these programs is strictly voluntary and that we are free to choose not to participate in such programs. We also agree that we and/or my child, is participating in these programs with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage that we may suffer by participating in these programs.

Releasers expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the Commonwealth of Massachusetts and that this Release shall be governed by and interpreted in accordance with said laws of the Commonwealth of Massachusetts. Parties hereto agree that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

IN WITNESS WHEREOF, Participant and/or Participant Parent/Guardian

Has executed this release on the _____ / _____ , _____
 day month year

Participant's Name (Please Print): _____

Parent's Name (Please Print) _____

Parent's Signature: _____

In case of emergency, please contact: (PLEASE PRINT)

Name: _____

Relationship to Participant: _____ Phone: _____

Address: _____