

# 2021 Tri-City Basketball League

## Deadline Monday, December 6, 2021

### 3 on 3 Basketball League

2nd & 3rd Grade Division  
Boys & Girls

The 3-on-3 youth basketball program is designed to develop individual skills and basic fundamentals of the game, but in a team setting by placing fewer players on the court at one time.  
Games begin in mid January.



### 5 on 5 Basketball League

4th, 5th & 6th Grade Division  
Boys & Girls

The 5 on 5 youth basketball program is designed to develop individual skills and basic fundamentals of the game.  
Games begin in mid January.

- **Games** are played at East Alton Keasler Complex or Roxana Community Gym. Games will be played on week nights and Saturdays. No team registrations.
- **Free Throw Competition:** Each participant receives 5 free throws prior to each of their regular scheduled games. Awards will be given to 1st and 2nd place winners in their league:
- **Includes:** 10 game schedule, free throw competition, shoot-out and league shirts

**Fee:** \$40 (A \$5 late fee will be added after the deadline; Monday December 6, 2021)

**Register at:** Round House 633 N Wood River Ave. Wood River, IL 62095

Questions? Please call 618-251-3130 **Also, sign up ONLINE at [wrparks.org](http://wrparks.org)**

**The success of our programs is dependent upon Volunteer Coaches:**

Would you be a(n): Coach  Yes  No Assistant  Yes  No

*Mandatory for all coaches & assistants to fill out a coaches background check. This is for the safety of our children.*

Circle t-shirt Youth Size: YS(6-8) YM(10-12) YL(14-16) Adult Size: AS AM AL AXL

DIVISION \_\_\_\_\_ DID YOU PLAY LAST YEAR? **IF YES**, WHICH TEAM \_\_\_\_\_  
**The Tri-City Agencies are responsible for determining which roster a child is placed on, not Coaches or Parents!**

**CHILD'S NAME** \_\_\_\_\_ **M / F** **Height** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**SCHOOL ATTENDING** \_\_\_\_\_ **GRADE** \_\_\_\_\_ **D.O.B** \_\_\_\_/\_\_\_\_/\_\_\_\_ **AGE** \_\_\_\_\_

**EMAIL ADDRESS** \_\_\_\_\_

**ANY MEDICAL CONDITIONS?** \_\_\_\_\_

**EMERGENCY CONTACT** \_\_\_\_\_ **PHONE** \_\_\_\_\_ **RELATION** \_\_\_\_\_

*I, the undersigned parent or legal guardian of the above named child, do agree to abide by the Parents Code of Ethics. I do hereby consent and agree that the above named minor may participate in the Tri-City basketball program. I understand and acknowledge that there are certain risks of physical injury associated with my child's participation in the above named program which may occur through no fault of any volunteer, participant, employee, or officer of the Tri-City Recreation League or any other sponsor or party. Photos taken at event could be used for advertisement. If you do not want your child's photo posted please let the staff know.*



**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**OFFICE USE ONLY:** DATE: \_\_\_\_\_ AMOUNT PAID \_\_\_\_\_ RECEIVED BY \_\_\_\_\_