



# Fall 2021 Basketball League

### **LEAGUES OFFERED:**

Upper League Code# 2110303

Tuesday games. Intermediate to Upper level players and teams.

Lower League Code# 2110302

Thursday games. No current or former college/university team members under age 35.

#### **IMPORTANT DATES:**

Friday September 17, 2021 - Registration opens for Bellevue residents & returning teams.
 Wednesday September 22, 2021 - Registration opens for everyone.

Friday October 1, 2021 - Registration & Payment Deadline

October 19 – December 16, 2021 - League Play

#### COSTS:

League Fee: \$477 per team
 Nonrefundable if requested less than 3 weeks prior to start of league play or schedules have been set.
 \$35 administrative fee if refund/change request granted.

Visa, MasterCard, Cash, Checks accepted.

### **GAME INFORMATION:**

- <u>6</u> games guaranteed, one match per week. Playoffs optional.
- Gyms: Bellevue Community Centers and Hidden Valley Sports Park
- Game nights:
  - Tuesdays Upper
  - Thursdays Lower
- Two referees provided for each game by the Pacific Northwest Basketball Officials Association.
- Modified high school rules used, with 20-minute halves (running clock except for timeouts, foul shots, and unforeseen stoppages of play, until the last two minutes of each half, when there will be a regulation clock).
- League rules: <a href="https://parks.BellevueWA.gov/adult-leagues">https://parks.BellevueWA.gov/adult-leagues</a>
- Rosters due at time of registration. Revisions allowed until the third week of league play.
- Interested Players List: for list of players or to be added, contact <u>LEAGUES@BellevueWA.gov</u>

### **REGISTRATION REQUIREMENTS:**

- Registration Form
- Team Roster with residence addresses

(Online Registration: Email to <u>LEAGUES@BellevueWA.gov</u>)

Full League Fee

(Company Sponsorship: payment must be received by registration deadline. Contact Shirley)

## **REGISTRATION OPTIONS:**

Online Registration <a href="https://register.BellevueWA.gov">https://register.BellevueWA.gov</a>

Drop-Off Location: Bellevue City Hall

Service First Desk 450 110<sup>th</sup> Ave NE Bellevue, WA 98004

• Mailing Address: Shirley Louie

Bellevue Parks & Community Services/Enterprise Division

PO Box 90012

Bellevue, WA 98009-9012

• E-mail Address: <u>LEAGUES@BellevueWA.gov</u>

• Fax: (425) 452-7221

Attn: Shirley Louie

# FOR MORE INFORMATION:

• https://parks.BellevueWA.gov/adult-leagues

https://register.BellevueWA.gov

• <u>LEAGUES@BellevueWA.gov</u>

League Coordinator: Shirley Louie

slouie@BellevueWA.gov

(425) 452-4479





# Fall 2021 Basketball League

# **Team Registration Form**

Please fill in the information.

Fall [✔ ] Winter [] Spr	ring [ ] Year [2021]					
Team Name:	Sponsor (if applicable):					
Manager's Name:	Phone: (cell ) (day) (evening)					
Street Address:	Fax:					
City, State, Zip:	Email Address:					
League:  UpperTues League Code# 2110303 LowerThur League Code# 2110302  Notes:  REGISTER ONLINE  Type of Payment:	Payment Enclosed (check all that apply):  \$477 Team League Fee Nonrefundable if requested less than 3 weeks prior to start of league play or schedules have been set. \$35 administrative fee if refund/change request granted.  Total Enclosed					
Cash (Do not send in mail) Check or money order (payable to "City of Bellevue") Company Sponsor Check (must be received by registration Charge Card (check type): Visa MasterCard	on deadline)					
Account #: Expiration Date:						
ls your team new to Bellevue Basketball League?						
If it is, how did you find out about our league?						
If not, what season did your team play in last?						
Season: Year: Former team name:						

# For Office Use Only:

Date Received	Registration Form	League Fee	Payment Type	Date Processed	Processed by	Roster	Addresses





# Fall 2021 Basketball League

**Team Roster & Liability Waiver** (rev 3/7/19)

#### WAIVER OF LIABILITY/RELEASE - PLEASE READ CAREFULLY

#### **Team Name:**

In consideration of myself and/or my child(ren) being allowed to use City of Bellevue Parks & Community Services facilities and/or participate in the City-sponsored activity(ies) identified herein, I ASSUME ANY AND ALL RISKS, INCLUDING RISK OF INJURY OR DEATH, associated with my or my child(ren)'s use of said facilities and/or participation in said activities. I further agree on behalf of myself, my heirs, executors, assigns, and personal representatives, to waive and RELEASE any and all rights and claims for damages, including attorney fees, I now, or may hereafter have, whether known or unknown, against the City of Bellevue and its officials, employees, and agents for any injuries suffered by me or my child(ren) in connection with the use of City facilities or participation in the City-sponsored activity(ies) identified herein. I acknowledge that I have carefully read this WAIVER OF LIABILITY and fully understand that I am waiving any right that I may have to bring a legal action or to assert a claim against the City of Bellevue in connection with the use of City facilities or participation in the City-sponsored activity stated above.

**PHOTO/VIDEO RELEASE:** I give my permission to have photos and/or video and audio recordings taken of me or my child(ren) during City of Bellevue activities and authorize the City of Bellevue to copyright, use, and publish the same. I understand I am waiving any right of privacy, compensation, copyright or other ownership right connected to the photo or recording. If you do not give permission to have photos and/or video and audio taken of you or your child(ren), please contact 425-452-4479 or <a href="Leagues@bellevuewa.gov">Leagues@bellevuewa.gov</a>.

I acknowledge that I have carefully read this WAIVER OF LIABILITY / RELEASE and fully understand that I am waiving any right that I may now or hereafter have to bring a legal action to assert any claim against the City of Bellevue in connection with my or my child(ren)'s participation in this activity.

I have voluntarily agreed to participate in Bellevue Parks and Community Services Adult Sports Leagues and I agree to adhere to League rules and regulations.

By signing the signature line below, I accept the conditions printed above:

Signature (required before playing)	Date	Printed Name	Phone(s)	Residence Address	City	Zip
1.						
2.						
3						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						