Dover Recreation Adult Basketball league (Ages 30+)

Registrations accepted in order of receipt until required players (54) to fill the rosters is reached (application and payment must be received). There will be a maximum of six teams in the league (reduced by number of applicants).

- 1. Teams are rostered via a captain's draft.
- 2. All games played Monday/ Thursday nights at the **McConnell Center Gym** from mid-April June 27th. Games times are 5:15 PM, 6:25 PM (est.), and 7:35 PM (est.). Each game will have 2-20 minute halfs (running clock 1st 5 minutes, stop clock last 15 minutes).

Registration Fee: \$150. Refunds will not be issued once teams are drafted. Dover Recreation reserves the right to remove any player without a refund based on behavior or incidents on court that are detrimental to the league and/or facility. Any player receiving a 2nd Technical Foul throughout the season, or is ejected from a game for unsporting behavior will be suspended for their next game. A 3rd Technical Foul will result in suspension for the rest of 2025 season and the player will have to meet with league administrators before registering for future seasons.

Ouestions? Ricky Conway (603)516-6401 r.conway@dover.nh.gon

Please Print Personal Info				
Last Name:		First Name:	First Name:	
Street:	City:	State:	Zip Code:	
Phone Number/Email: Cell Phone ()		Emergency Contact: Name: Relationship:		
Email:	-	Cell Phone ()		
Physical Information: Height:	<u>"</u>	Weight:	lbs.	
Date of Birth: / / (Must b	ust be 30 years old by May 1, 2025)			
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I, the undersigned, do hereby acknowledge that the foregoing activity is recreational and not a necessity, and agree to release, waive, covenant not to sue, and hold the City of Dover, its Recreation Department, and all officials, employees, and agents harmless from and against any and all manner of liability, including but not limited to actions, omissions, and/or negligence of the City and/or its officials/employees/agents, for any injury, sickness, impairment, disease, illness, death, loss, expense, or damages which is or may be suffered by you and/or the aforementioned individual arising out of or in relation to his/her participation in this activity. The foregoing release/waiver/covenant not to sue/hold harmless also extends to any and all risks associated with the novel coronavirus (COVID-19), for which I expressly assume all risk associated with and which I understand is extremely contagious and is believed to spread mainly from person-to-person contact.

Please indicate any medical concerns: medication(s), problems, or other physical disabilities of which we should be made SIGNATURE: