

St. Joseph - Immaculate Conception

CYO Basketball Clinic 2022

This year, CYO is offering an 8 week basketball clinic for children in grades 3 through 6. The clinic will be a combination of skills and competitive games.

Dates (6 weeks)	January 17- February 25 *makeup date week of March 4
Place	St. Joseph's Gymnasium
Time	Once a week, either Wednesdays or Thursdays 5:00- 6:30pm or 6:30-8:00pm
Cost (includes t-shirt and basketball)	\$25
Registration Deadline	December 10, 2021
*Dates and times are subject to change based on number of participants, as well as pandemic conditions, NYS DOH regulations and the Arch Education department.	

In order to participate in the CYO basketball clinic, the following guidelines must be followed:

- Follow all CDC, NYSDOH and local health guidelines
- Temperature screening prior to entering facility, face coverings must be worn
- Prescreening questionnaire administered to all participants
- NY state DOH requires masks while playing in an indoor setting
- One spectator will be permitted in the gym at this time.

Any questions, contact **Kim Knittel** at **845-264-0440** or **kimberly.knittel@outlook.com**.

Registration should be mailed to:

Kim Knittel
51 Meadow Ridge Lane
Lagrangeville, NY 12540

CYO Basketball Registration 2022

Player Information

Child's Name	
Date of Birth	
Grade	
Address	
T-shirt size	*Indicate youth or adult

Parent/Guardian Contact Information

Name/ Relationship	
Email Address	
Phone Number	
Name/ Relationship	
Email Address	
Phone Number	

Emergency Contact Information

Name	
Address	
Phone Number	

THIS SECTION TO BE COMPLETED BY PARENT/GUARDIAN

AUTHORIZATION TO PARTICIPATE

I hereby give consent for my child/children to participate in the activities in CYO Basketball. I understand that there is risk of injury to my child / children as a participant in CYO basketball, and I hereby assume the risk of my child / children's participation in such activities. In consideration of the CYO's acceptance of my child / children in CYO basketball, and to the extent permitted by law, I hereby agree to release and hold harmless the Archdiocese of New York, Catholic Charities of the Archdiocese of New York, the Archbishop of the Archdiocese of New York, employees, servants, and volunteers from any and all responsibility, liability, claims, and / or demands arising from my child / children's participation, specifically including any injury that may occur due to negligence. In the event that I cannot be reached in an emergency, I give permission to the physician selected by CYO basketball to secure and administer treatment, including hospitalization, for all of the above named persons. I also understand and agree to abide by any restrictions placed on me or my child / children's participation in CYO basketball activities, and that I and/ or my child / children will be dismissed from the program if we fail to abide by CYO basketball program rules.

PHOTO AUTHORIZATION

I hereby consent to the taking of photographs, movies, or videos of my child / children by CYO basketball or its designated representatives in connection with any advertising. I also grant the rights to edit, use, and reuse said products for any and all purposes selected by CYO basketball and release any and all rights, title, and interest we may have in such photographs, movies, or videotapes, finished pictures, reproductions, copies of negatives of the same in connection with such uses.

Print Name of Parent/Guardian: _____ Date: _____

Signature of Parent/Guardian: _____