



**Township of Cedar Grove
Recreation Department**
525 Pompton Ave. Cedar Grove, NJ 07009
(973) 239-1410 x220

7th & 8th Grade

West Essex Recreational Basketball League

FOR CANCELLATIONS DUE TO INCLEMENT WEATHER;
“LIKE” US ON FACEBOOK, www.facebook.com/cedargroverec or
“FOLLOW” US ON TWITTER, @CedarGroveRec

- **Who:** Boys and Girls grades 7 & 8
- **Where:** -Practices will be determined by coach beginning week of 11/12
-Games some weeknights and/or Sat. at MMS or in surrounding W Essex area
- **When:** First team workout November 2nd at Memorial MS;
(You will still be placed on a team even if you cannot attend)
7th/8th Girls- 11:00am-12:00pm
7th/8th Boys- 12:00-1:00pm
- **Fee:** \$95.00/child – CHECKS PAYABLE TO TOWNSHIP OF CEDAR GROVE
Cut-off will be Nov. 1st, any one added after this date will be at discretion of Rec. Department. **Late fee of \$10 after 11/1/19**

Description: This league is made up of Cedar Grove and West Essex teams. All teams will consist of a maximum of 10 players. All children will receive equal playing time in games, and will practice 1-2 times per week depending on the coach. This is a recreational league so it is all about learning the game while having FUN! **There is no guarantee to your child playing on a certain team. We will not decide teams by requests.**

7th/8th Grade Basketball – 2019-20

NAME _____ GRADE _____ SCHOOL _____

ADDRESS _____ HOME PHONE _____

CELL PHONE _____ EMERGENCY CONTACT _____

EMAIL _____ PREFERRED HOSPITAL _____

Any Allergies/Health Conditions we should be aware of? (If *Yes*, explain) _____

Check One: BOYS _____ GIRLS _____

If interested in Head Coach position please print name _____

*MANDATORY FREE COACHING CLINIC ON NOVEMBER 18TH 7:15PM AT CGHS

T-Shirt Size: Adult OR Youth Small Medium Large XL(adult only)

I will not hold Cedar Grove Township, Cedar Grove Recreation or any of their representatives responsible for any loss or injury I may incur while playing or practicing. I am in good health and able to participate without restriction. I also authorize Cedar Grove Recreation Department personnel/coaches to contact appropriate emergency personnel, should I need medical assistance. In conjunction with the child's participation in the recreation program, the Township may make or arrange to make certain images of a child or children participating in such activities, such as still photographs, video tapes or other recorded moving images. I consent to, give permission for and authorize the Township to use the images of the child.
There is no guarantee to your child playing on a certain team. We will not decide teams by requests.

Signature _____

Date _____

\$95.00