

**La Grange Optimist Little Dribblers Registration Form  
2011-2012 Season (ALL DIVISIONS)**

Player's Name \_\_\_\_\_  
(Please Print)                      First                      MI                      Last

Address \_\_\_\_\_  
   Street                      City                      Zip

Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_ (Age: As of start of 2011-2012 school year)

Height \_\_\_\_\_ Age \_\_\_\_\_ Years of Experience \_\_\_\_\_ Gender M F

**Uniform: Check Size**

Youth:	<input type="checkbox"/> Small (6-8)	<input type="checkbox"/> Medium (10 -12)	<input type="checkbox"/> L (14-16)
Adult Men:	<input type="checkbox"/> Small	<input type="checkbox"/> Medium	<input type="checkbox"/> Large <input type="checkbox"/> Extra Large

*(Note: Choose a size larger than your child wears due to shrinking.)*

Parent's or Guardian's Name \_\_\_\_\_

Parent's or Guardian's E-Mail \_\_\_\_\_

Parent's or Guardian's Phone Home \_\_\_\_\_ Cell: \_\_\_\_\_

Health Concerns/Special Medications \_\_\_\_\_

*I/We know that participation in any type of sport may result in serious injuries.  
I/We do hereby waive, release, absolve, indemnify, and agree to hold harmless the La Grange Optimist Club, officers, coaches, assistant coaches, managers, directors, La Grange ISD., organizers, sponsors, supervisors, participants, persons or parents transporting my/our child to and from activities, for any claim arising out of any injury to my/our child whether the result of negligence or for any other cause.  
I/We, the parents/guardians of the above named participant are solely responsible for any medical obligations incurred during these activities and give the La Grange Optimist Club coaches, and assistant coaches, managers, directors, persons transporting my/our child to and from activities permission to seek medical treatment for my child in case of injury or illness.*

Parent's or Guardian's signature. \_\_\_\_\_

*The La Grange Optimist Little Dribblers Basketball program is a totally **Volunteer** organization, directed completely towards providing a meaningful team sports program for all local children. The program will not work without the volunteer efforts of all parents. Please check at least ONE of the following categories for volunteering to help. Please use an **M** for Mother and an **F** for the Father. **COACHES AND REFEREES WILL HAVE AN OPPORTUNITY TO ATTEND TRAINING CLINICS.***

Coach  Shirt Size                      Assistant Coach  Shirt Size                      Team Parent  Team Sponsor (\$150)

Division Leader                       Referee                       Find a Sponsor

**Registration deadline is Novemer 4, 2011. FEES: \$40.00 per child, \$80.00 a family. Maximum....NO REFUNDS. Make all Checks payable to the La Grange Optimist Club. Mail Applications to: La Grange Optimist Club @ P.O. Box 672 La Grange, Texas 78945 Applications can be picked up and delivered if unable to mail to: La Grange Sears, La Grange Chevron or downloaded from the following website [www.lagrangeoptimist.org](http://www.lagrangeoptimist.org)**

**If you have questions, please e-mail or call one of the following:**

Bradley Loehr -	<a href="mailto:bradley.befco@cmaaccess.com">bradley.befco@cmaaccess.com</a>	979-968-2847
Melissa Dockery -	<a href="mailto:melissad@cvctx.com">melissad@cvctx.com</a>	979-966-3760
Randy Boyd -	<a href="mailto:theboyds@cvctx.com">theboyds@cvctx.com</a>	979-966-8825

**Office Use Only: Cash/Money Order                      Check #                      Amt Rec'd**

**THERE NEEDS TO BE ONE APPLICATION FOR EACH CHILD  
PLEASE ATTACH PLAYER/PARENT CODE OF ETHICS AND VOLUNTEER APPLICATION  
WITH COPY OF VALID GOVERNMENT ISSUED PHOTO IDENTIFICATION**