



BASKETBALL LEAGUE

WINTER IC 2018

The LSF @ IC Winter downtown basketball league starts the week of Jan 22nd. League play is every Tuesday or Thursday night for eight weeks before ending in the play-offs. All teams are guaranteed eight regular season games. Each team will play one game a week.

The league is capped at 8 teams per night. Be sure to register early to guarantee your spot. Players must be 18 or older, and teams must have a minimum of seven players, maximum of ten players. Games begin at 6:30pm.

Two IHSA Certified referee's for every game. Detailed individual and team statistics e-mailed after every game. Uniforms included in the league fee. Prizes awarded to top two teams. Full Size Basketball Court with Shot Clocks, Spectator Seating and Full Locker-room Privileges. Fee also includes two scheduled practices before or during the regular season.

COST:

\$895 per team, or **\$119** per LSF member *

\$995 per team, or **\$149** per non-member *

**Captain pays 10% deposit at time of team registration.*

Remainder of fees due Feb 9th.

For more information, contact
ICBasketball@LakeshoreSF.com

Lakeshore Sport & Fitness Basketball Registration Form

Please return application to ICBasketball@LakeshoreSF.com.

Please print clearly and fill out each field.

Date _____

Captain's Name _____

Team Name _____

Home Phone _____ Work Phone _____

Mobile Phone _____ Email _____ Address _____

Address _____ Zip Code _____

Emergency Contact Name _____ Phone _____

Membership Status: Member Number _____ Guest Number _____

Game Times: (choose preferred day and time slot) Tuesday: 6:30pm - 7:30pm 8:30pm, Thursday: 6:30pm - 7:30pm 8:30pm

Player Name	Player Phone	Player Email	Jersey Size

Payment options / 10% payment is due at the time of registration: Remainder due Feb 9th, 2018:

Payment Method Check (please enclose check) # _____ House Charge Credit Card
 Credit Card _____ Card Number _____ Exp. Date _____

***There is a 4% processing fee on Credit Card transactions.**

Policies: Participants must pay at the time of registration . All members will be billed on their Lakeshore SF account if payment is not received with registration form.

Terms and Conditions I agree to assume full risk and to waive, relinquish, and release all claims against the agents, servants, and employees of Lakeshore SF from any such claims resulting in injury, damages or loss sustained on account of participation in this camp program. I understand that I am responsible for all personal medical insurances and that as a participant must cover all medical costs incurred. I also understand that every precaution is taken to protect the safety of each participant. I agree to emergency treatment by a physician or hospital in the event that the emergency contact or I cannot be reached. Please note that by signing this document, you understand that it is now KLEIN-TIME!

Signed: _____ Date: _____