

TIM DeGEETER
MAYOR

www.cityofparma-oh.gov



MICKEY VITTARDI
PARKS AND RECREATION
DIRECTOR

November 2, 2015

TO: CLASS "C" & "D" BASKETBALL MANAGERS

SUBJECT: 2015-2016 BASKETBALL REGISTRATION

Registration for the Class "C" (11th & 12th Graders) & "D" (9th & 10th Graders) Basketball League is scheduled for **November 4th through November 25th, 2015** between the hours of 8:30 a.m. and 4:00 p.m. at the Parma Recreation Department, 7335 Ridge Road.

FEES WILL BE AS FOLLOWS: Two (2) separate checks are required

\$150.00 Entry Fee

\$120.00 *PAAF Uniform Fee

\$108.00 Refundable Forfeit Fee (provided no games are forfeited)

\$378.00 **TOTAL FEE DUE**

\$150.00 CHECK PAYABLE TO THE CITY OF PARMA

\$228.00 CHECK PAYABLE TO P.A.A.F.

Any team registering after the **November 25th** deadline must pay an additional \$25.00 late fee, if accepted. All fees are subject to change without notice.

NOTE: Game Fees are \$27.00 per game (\$18 Referee, \$5.00 Scorer & \$4.00 Timekeeper) are payable in cash on the court.

PARTICIPANT MUST BE A RESIDENT OF PARMA, PARMA HEIGHTS OR SEVEN HILLS OR BE AN ENROLLED STUDENT AT ONE OF THE FOLLOWING SCHOOLS; PARMA CITY SCHOOLS, PADUA, HOLY NAME OR THE PARMA COMMUNITY SCHOOL. Managers and coaches will be responsible for knowing and verifying the grade of each player on their respective teams. Any ineligible player on any team may disqualify that team for any further play.

All teams must have a designated responsible adult (25 years of age or older) present for all games. These individuals must be on the player's bench at ALL TIMES during each game, sign in prior to the game and serve in a supervisory role. If no designated adult is present, the game will not begin (or continue) and will be considered a forfeit. This is a final effort on behalf of the Parma Recreation Department to control the actions of some players on and off the court.

Should you have any questions, please contact the Recreation Department at 440-885-8144.

Sincerely,

Michael A. Vittardi
Parks & Recreation Director

2015-2016
CLASS "C" & "D" BASKETBALL UNIFORM POLICY

THE \$120.00 FEE COVERS THE PURCHASE OF TWELVE (12) T-SHIRTS. EACH SHIRT IS PRINTED WITH THE TEAM NAME AND IS NUMBERED 1 THROUGH 12.

IN THE EVENT THAT LESS THAN TWELVE SHIRTS ARE PURCHASED, A PARTIAL REFUND WILL BE GIVEN AT THE END OF THE SEASON.

SHOULD A TEAM WISH TO ORDER THEIR OWN SHIRTS, THE \$120.00 FEE WILL BE WAIVED UPON REMITTANCE OF A RECEIPT FROM RETAILER FOR PRINTED AND NUMBERED SHIRTS.

WILL YOUR TEAM BE PURCHASING T-SHIRTS THROUGH THE CITY OF PARMA

T-SHIRT PROGRAM? YES NO

IF NO, PLEASE INDICATE YOUR UNIFORM COLOR: _____

TEAM NAME TO APPEAR ON T-SHIRTS: _____

SHIRT COLOR PREFERENCE: 1st. choice: _____ 2nd choice: _____

3rd choice: _____

SHIRT SIZES:
(Maximum 12 shirts)

ADULT LARGE _____

ADULT X-LARGE _____

ADULT XX-LARGE _____

MANAGER SIGNATURE: _____ DATE: _____

**2015 -2016 CITY OF PARMA
APPLICATION FOR MEMBERSHIP IN PARMA'S BASKETBALL LEAGUE**

We, _____ do hereby apply for representative membership in the (circle one)
(Team Name)
Men's "B" Class "D" (9th & 10th Graders) **Class "C" (11th & 12th Graders)

Basketball League and will comply with the Rules of said League. Completion of this application does not guarantee acceptance in the League. ** You may be younger and eligible to participate in the Class "C" League.

MANAGER'S NAME: _____ ADDRESS: _____

DAYTIME PHONE: _____ CITY & STATE: _____

HOME PHONE: _____ ZIP CODE: _____

If the team is sponsored by an Organization or Commercial Firm, please list the name and address below:

ORGANIZATION / FIRM NAME: _____

ADDRESS: _____ PHONE: _____

CITY, STATE & ZIP: _____

LEAGUE AND DIVISION PLAYED IN LAST YEAR: _____

TEAM NAME: _____ MANAGER: _____

PLACE STANDING AT END OF SEASON: _____ WON: _____ LOST: _____

IF TEAM MERGER, LIST NAME OF TEAMS: _____ & _____

WISH TO PLAY IN DIVISION: DIV I: _____ DIV II: _____ DIVIII: _____
(DIVISION I BEING MOST COMPETITIVE - DIVISION III MOST RECREATIONAL)

I, _____ MANAGER OF THE _____
(Manager's Signature) (Team Name)

Have fulfilled the requirements for entry in the Parma Basketball League. I have also received a Basketball Rule Book and I will review the rules with my team.

CLASS "C" & CLASS "D" ONLY

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_____ Print Name _____ Signature

_____ Daytime Telephone _____ Home Telephone

PLEASE RETURN BASKETBALL FORFEIT FEE THE 2015- 2016 SEASON TO:

NAME: _____ ADDRESS: _____

SIGNATURE: _____ CITY, STATE & ZIP: _____