

EUREKA CITY



YOUTH BASKETBALL

BOYS' and GIRLS' LEAGUES

A PROGRAM OF THE UTAH JAZZ & COMMUNITY RECREATIONAL AGENCIES

THE JR. JAZZ PROGRAM SIGN-UPS WILL BEGIN ON
WEDNESDAY, OCTOBER 23, 2024.

ALL KIDS FROM 1st GRADE THROUGH 8th GRADE ARE ENCOURAGED TO PARTICIPATE

JR. JAZZ DIVISION

Instructional - 1st & 2nd Grades

* (Instructional Practices only, No Scheduled Games)

Novice - 3rd & 4th Grade Boys / 3rd & 4th Grade Girls

Intermediate - 5th & 6th Grade Boys / 5th & 6th Grade Girls

JR. HIGH DIVISION

7th & 8th Grade Boys

7th & 8th Grade Girls

EACH PARTICIPANT WILL RECEIVE:

- A) REVERSIBLE JERSEY
- B) UTAH JAZZ GAME TICKET
- C) CERTIFICATE OF PARTICIPATION
- D) MEMBERSHIP CARD
- E) JAZZ TEAM PICTURE
- F) 8 GAMES AND PRACTICES

Sign up for the Jr. Jazz League at:

Eureka City Office

15 N Church Street

Eureka, Utah 84628

DATE: **October 23rd – November 18th**

TIME: 8:00 a.m. to 5:00 p.m.

COST: \$45.00

No Exceptions!!! Applications will not be accepted after November 18th No Exceptions!!!

Registrations will be taken in the City Office Monday - Friday,
8:00 a.m. to 5:00 p.m.,

Make checks payable to Eureka City

**PARENTS NEEDED AS VOLUNTEER COACHES. HIRING FOR PAID REFEREES &
SCOREKEEPERS.**

**Without Referees/Scorekeepers/Coaches for all games there will be no Jr. Jazz Program this year
FOR MORE INFORMATION CALL 435-433-6915**

UTAH JAZZ YOUTH BASKETBALL APPLICATION

Utah Jazz Youth Basketball Player/Parent Registration Form

(Please Print)

Name of Player _____ Male Female

Address _____

Name of Parent or Guardian _____

City _____ ZIP _____ E-mail Address _____

Home Phone # _____ Business Phone # _____

Player's Birthday _____ Age _____ Height _____

Grade _____ School _____

In Emergency Notify _____ Telephone # _____
(Other than the Above-Named Parent)

PARENT'S AGREEMENT

- (1) I hereby certify that _____ is in good health and capable of participating safely in the Utah Jazz Basketball Program and has accident and health insurance and the Community Recreation Departments and all other participative agencies are not liable for any accident while participating in the Utah Jazz Youth Basketball Program.
- (2) I hereby authorize the Directors of the Utah Jazz Youth Basketball Program to act on my behalf in accordance with their best judgment in case of an emergency.
- (3) I understand the goals and objectives of the Utah Jazz Youth Basketball Program, which are based on fun, fair play, skill development and teamwork.
- (4) I, as a parent or guardian, am willing to participate as a volunteer in support of the Program:
(Please Circle) Coach Assistant Coach Team Parent Referees Other

***Coaches Manual will be given to each coach.**

***Signature of Parent or Guardian** _____

Jersey Size (Circle One)

Youth	Youth	Youth	Adult	Adult	Adult	Adult
Small	Medium	Large	Small	Medium	Large	X-Large

FOR OFFICE USE ONLY

DATE	\$ AMOUNT	RECEIPT #	INITIALS