



www.ohiosportsplus.com or (614) 235-3606

Spring League Championship Series

Competitive Travel/AAU Teams Only

****No individual Sign ups****

Spring, 2017

Who can participate: Boys Travel/AAU teams Grade 3rd -8th
Girls Travel/AAU teams Grade 3rd -8th

Location: Thomas Worthington High School
300 West Granville Road
Worthington, OH, 43805

League Starts: (April 17– May 27)

*Game times will be posted on the website April 12, 2017

Applications Due: Monday, April 7, 2017 (postmarked by this date) Please make checks payable to "Ohio Sports Plus"

Competitive Teams: Compete against other local area Travel/AAU Team (Seeking 4 teams per division)

No individual sign ups

- * Teams will play one game each week during 6 week league.
- * Best W/L record during first 4 weeks will determine playoff seeds 1-4.
- * Playoff starts week 5
- * Single elimination playoffs
- *Winners of week 5 playoffs, will play for championship week 6, losing teams from week 5 playoffs will play each other week 6
- * Awards for 1st and 2nd place teams.
- * Teams are responsible for their own jerseys
- **No refunds after league starts.

Cost: \$560

For more information contact Ohio Sports Plus, (614) 235-3606, basketball@ohiosportsplus.com



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Team Name: _____ Coach Name: _____

Boys (Circle): Division 3/4th _____ Division 5/6th _____ Division 7/8th _____

Girls (Circle): Division 3/4th _____ Division 5/6th _____ Division 7/8th _____

Coach e-mail: _____

Primary Phone: (____) _____ - _____ Secondary Phone: (____) _____ - _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Player's Name	Grade	School
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		
6. _____		
7. _____		
8. _____		
9. _____		
10. _____		

ACKNOWLEDGMENT AND RELEASE

Ohio Sports Plus Training Academy hereafter referred to as Ohio Sports Plus, I understand and acknowledge that any participant in the event who does not abide by the rules and regulations promulgated by OHIO SPORTS PLUS is subject to dismissal from the event without reimbursement or recourse. I hereby release and discharge OHIO SPORTS PLUS, its staff, officers, employees, agents, and affiliated entities from any and all liability or causes of action arising out of, or in connection with, the dismissal of my child from the event for violation of any rules and regulations promulgated by OHIO SPORTS PLUS.

LIABILITY WAIVER AND RELEASE

I hereby release and discharge OHIO SPORTS PLUS, its staff, officers, employees, agents, and affiliated entities from any and all liability or causes of action arising out of, or in connection with, my child's participation in the program, including, but not limited to any and all liability or causes of action arising out of, or in connection with any negligence of, or any acts or omissions of, OHIO SPORTS PLUS, its staff, officers, employees, agents, and affiliated entities.

I hereby authorize OHIO SPORTS PLUS and its staff to act on behalf of my child according to its best judgment in any emergency requiring medical attention including in relation to obtaining any medical or hospital treatment.

I hereby release and discharge OHIO SPORTS PLUS, its staff, officers, employees, agents, and affiliated entities, from and all liability or causes of action arising out of, or in connection with, any such actions by OHIO SPORTS PLUS in any emergency requiring medical attention, including but not limited to any and all liability or causes of action arising out of, or in connection with, any negligence of, or any acts or omissions of, OHIO SPORTS PLUS, its staff, officers, employees, agents, and affiliated entities.

I have read and reviewed this REGISTRATION FORM, including the ACKNOWLEDGMENT AND RELEASE and the LIABILITY WAIVER AND RELEASE and I have had the opportunity to ask any questions that I might have regarding the same. I expressly agree to the terms and provisions of this REGISTRATION FORM, including the ACKNOWLEDGMENT AND RELEASE and the LIABILITY WAIVER AND RELEASE above.

For Office Use Only:
Date Rec'd: _____
Check #: _____
Amount Pd: _____