

# Adult Basketball Leagues

## Okun Fieldhouse

20200 Johnson Dr, Shawnee, KS 66218

Code	Day	League	Games	Team Cost
18555	Tues	Mens C	8	\$390
18556	Thurs	Mens C	8	\$390

## Roeland Park Sports Dome

4850 Rosewood Dr, Roeland Park, KS 66205

18553	Mon	Mens C	8	\$295
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Players must wear similar colored shirt and have a number on the shirt. Numbered jerseys will be supplied if needed.

Check league schedules  
and standings online at  
[www.jcprd.com/adultsports](http://www.jcprd.com/adultsports)

Full payment required at registration: cash,  
money order, company check,  
Visa, MasterCard, and  
Discover are all accepted.

REGISTRATION  
DEADLINE:

March 1st

Register online at [jcprd.com](http://jcprd.com)

Click "Register for Activities" and type in  
your league code from the chart above

## SPRING 2019



Join us for a fun  
season of basketball  
at Okun Fieldhouse,  
Roeland Park, or  
New Century Fieldhouse!

Games will start  
March 11th

Game times will alternate weekly:  
6:15, 7:15, 8:15, 9:15

Leagues do have a maximum amount  
of teams allowed. Registrations are  
accepted on a first come, first serve  
basis.

Register online or call/visit:

**Antioch Park**  
**(913) 913-831-3359**

6501 Antioch Road, Shawnee Mission, KS 66202

JOHNSON COUNTY  
Park & Recreation  
District

National Gold Medal Award Winner for Excellence!



# Adult Basketball Registration Form & Waiver

- Register online at [www.jcprd.com](http://www.jcprd.com) or register by phone by calling: (913) 831-3359 from 8:30am - 4:00pm, Monday - Friday
- Fax in registration: (913) 831-6336 for Visa, MasterCard, Discover from 8:30am - 4:00pm, Monday - Friday.
- Mail or walk-in payments must be received at Antioch Park Building D, 6501 Antioch Rd, Shawnee Mission, KS 66202
- You will be notified if league cancels due to insufficient registration. Refunds will be made only when leagues are filled or when canceled by the Recreation District. Refunds may take 2 – 3 weeks.
- Team managers will be emailed one week before start date with the first week's game time. Game times change week to week. The full schedule is handed out the first night.

<b>Location :</b> _____ <b>Day:</b> _____ <b>League:</b> _____	<b>League Code:</b> _____ (Can be found on the chart on the other side)
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**Manager's Name:** \_\_\_\_\_

**Team Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Home/Cell Phone:** \_\_\_\_\_ **Alt Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

Please charge fees to: MC \_\_\_ VS \_\_\_ DS \_\_\_

**Card Number:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**C I D:** \_\_\_ - \_\_\_ - \_\_\_ **Expires:** \_\_\_ - \_\_\_

(Your 3-digit Credit Card Identificatio Code(CID) is located on the back of your credit card above the signature line after the card number or last four digits of your credit card number. We cannot process your registration or hold a placement without this information.)

**Name as printed on Charge Card:** \_\_\_\_\_

WAIVER STATEMENT: " The undersigned states that he/she understands that the Johnson County Park and Recreation District is not and shall not be responsible for or liable for any illness or injury to person or damage to property resulting from the program in which the participant is enrolling or being enrolled or from his/her participating in said program, and the participant and the undersigned, if the participant is a minor or under other legal disability, hereby forever releases and holds harmless the said Johnson County Park and Recreation District, its employees, agents, and representatives from any and all claims of any kind that the participant, or the undersigned, or their respective heirs, executors, administrators, or assigns may have or claim to have resulting from participation in said program. Also, the undersigned and the participant authorize the Johnson County Park and Recreation District to use at its discretion any photograph(s) (black/white or color) and/or video taken of the participant while participating in the program and waive any and all claims that the participant or the undersigned or their heirs, executors, administrators, or assigns may have or claim to have resulting from such photograph(s) or reproductions thereof."

Registration Invalid without signature: \_\_\_\_\_