Four Levels of Basketball Discovery

Upward Basketball provides an experience that grows with young athletes over time by using a four-level, age-appropriate format. Each level is tailored to meet athletes where they are on their athletic journey, allowing them to reach their full potential, on and off the court.

**LEVEL 1**
Introduces the game and basic skills.

**LEVEL 2**
Develops basic skills while learning game rules.

**LEVEL 3**
Refines skills & learn team concepts while preparing for the next level of competition.

**LEVEL 4**
Implements middle school rules while competing at a high level.

**UPWARD BASKETBALL LEAGUE FOCUSES ON**

**CHARACTER DEVELOPMENT**
**DRILLS & GAMEPLAY**
**SKILLS TRAINING**

Experience the impact of the 360 Progression, a unique sports experience that develops young athletes mentally, athletically, spiritually, and socially.

**SIGN UP NOW!**

[upward.org](http://upward.org)

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PROGRAM SCHEDULE:
EVALUATIONS AND ORIENTATIONS:
REGISTRATION INFORMATION:
Crossroads Christian Church
REGISTER ONLINE, MAIL OR BRING INFORMATION TO:
740-632-0676
FOR MORE INFORMATION:
First Game -
First Practice -
PROGRAM SCHEDULE:
Saturday, November 17, between 9:00 a.m. and 12:00 p.m.
Basketball shorts are
CHEERLEADING:
Basketball is
optional
at a cost of
$65.

PAYMENT:
Participant Fee : $__________

FILE USE ONLY
For a larger print version of these terms and conditions please visit www.upward.org/app/terms-of-use
PLEASE READ CAREFULLY AND SIGN BELOW TO INDICATE YOUR AGREEMENT. NOTE: THIS FORM INCLUDES A RELEASE OF LIABILITY.
Please review and complete the sections below and sign in the space provided to indicate your agreement with all statements made in this form.
AUTHORIZATION AND RELEASE OF LIABILITY
I, the parent or guardian of the above-named child, authorize; with the participation of my child in the Upward Basketball Program (“Program”) of the above-named Church. My child will participate in the Program on a part-paid basis on this form. I understand that this Program is a nonprofit Christian sports activity program for youth and that my child’s participation is voluntary and not as a result of any requirement of any program, school or government agency. I understand that any fees to be charged by the Church is in recognition of the Church’s contributions, including tax deductible contributions to support the operation of the Program. I further understand and agree that my child’s participation in aesthetic and other activities of the Program necessitates involvement of injury risk and other than from various causes, including but not limited to accidents, falls, strains or other activities of the Program.

PARENT/GUARDIAN INFORMATION:
FATHER/GUARDIAN:
email:
I would like to assist this league by being a: Coach, Referee, Team Parent
MOTHER/GUARDIAN:
email:
I would like to assist this league by being a: Coach, Referee, Team Parent
Emergency Contact
Date of Birth
Gender
Address
City State Zip
Home Phone
Parent’s Cell
Date
Grade (18-19 school year)
City
State
Zip
Parent/Guardian
School Attendance
How many years has your child played organized Basketball?
If applicable, circle one
right eye cannot practice.
MON
THE
FRI
Upward Unlimited (herein being referred to as “UU”) athletic program (the “Program”) of the above-named Church. My child will participate in the UU sport denoted on this form. I understand that this Program is a nonprofit Christian sports ministry program for youth and that my child’s participation is voluntary and not as a result of any requirement of any program, school or government agency. I understand that any fees to be charged by the Church is in recognition of the Church’s contributions, including tax deductible contributions to support the operation of the Program. I further understand and agree that my child’s participation in aesthetic and other activities of the Program necessitates involvement of injury risk and other than from various causes, including but not limited to accidents, falls, strains or other activities of the Program.

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Emergency Contact
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Gender
Address
City State Zip
Home Phone
Parent’s Cell
Date
Grade (18-19 school year)
City
State
Zip
Parent/Guardian
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