



# JEMS HOOPS Fall Basketball League

Stevenson Park - 17400 Lysander Drive. Carson  
8/5/18 thru 10/21/18 (excluding 9/2 & 9/9) Starting Times 4-8pm  
**(SUBMIT ENTRY FORMS W/FEE ON OR BEFORE 7/20/18)**

Name of Church/Group: \_\_\_\_\_

Pastor's Signature: (REQUIRED FOR TEAMS USING CHURCH NAMES) \_\_\_\_\_

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

The following statement is to be read by each player before signing this roster. "By my signature on this roster, I acknowledge that this sport entails some risk to the safety of my person and property. I am participating in said sport with full knowledge and acceptance of said risk, and release JEMS and the City of Torrance of any liability in case of accident or injury. If any emergency situation should arise, I grant JEMS staff authority to obtain the necessary medical attention or help."

**Each player must be at least 16 years of age. Signature of parent or guardian is required if under 18 years of age.**

**Captain**

1) \_\_\_\_\_ ( ) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Player/Guardian signature \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

2) \_\_\_\_\_

Player/Parent or **Guardian** signature \_\_\_\_\_

E-mail \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

3) \_\_\_\_\_

Player/Parent or **Guardian** signature \_\_\_\_\_

E-mail \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

4) \_\_\_\_\_

Player/Parent or **Guardian** signature \_\_\_\_\_

E-mail \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

5) \_\_\_\_\_

Player/Parent or **Guardian** signature \_\_\_\_\_

E-mail \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

6) \_\_\_\_\_

Player/Parent or **Guardian** signature \_\_\_\_\_

E-mail \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

7) \_\_\_\_\_

Player/Parent or **Guardian** signature \_\_\_\_\_

E-mail \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

8) \_\_\_\_\_

Player/Parent or **Guardian** signature \_\_\_\_\_

E-mail \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

9) \_\_\_\_\_

Player/Parent or **Guardian** signature \_\_\_\_\_

E-mail \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

10) \_\_\_\_\_

Player/Parent or **Guardian** signature \_\_\_\_\_

E-mail \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

11) \_\_\_\_\_

Player/Parent or **Guardian** signature \_\_\_\_\_

E-mail \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

12) \_\_\_\_\_

Player/Parent or **Guardian** signature \_\_\_\_\_

E-mail \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

13) \_\_\_\_\_

Player/Parent or **Guardian** signature \_\_\_\_\_

E-mail \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

14) \_\_\_\_\_

Player/Parent or **Guardian** signature \_\_\_\_\_

E-mail \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

15) \_\_\_\_\_

Player/Parent or **Guardian** signature \_\_\_\_\_

E-mail \_\_\_\_\_

Leagues played in/Level of play \_\_\_\_\_

Entry fee is \$550.00 per team

Important: Entire fee must accompany this entry form.

Make checks payable to: **JEMS**. Mail to: **JEMS-Basketball League, 948 E. 2nd St., Los Angeles, CA 90012**