



# Competitive Basketball

Dear Players:

We are now planning for our Springtime Kingwood Competitive Basketball League. The format has been very successful every Spring. All teams will play at least one game a week. On occasion, some teams might play twice a week. The kids enjoy the Spring League—they get a chance to work on their game for the upcoming season in a game environment. We will not be able to accommodate as many players as we have in the Winter Program. Therefore, registration will be by the order in which the enclosed form is received. Below are some guidelines of the program.

1. The season will begin on Saturday, March 29 and all teams will play at least 7 games during the season.
2. All teams will play at least 1 game per week. Games will be played primarily on Saturdays. There will be a season ending championship tournament.
3. The CBL Tournament will begin on the Sunday that follows the last regular season game.
4. All games will be played in Kingwood & Atascocita.
5. All school basketball players are eligible to play & we have a large turn-out of middle and high school kids.
6. Uniforms are provided & certified High School Referees officiate the games.
7. Try-outs & Late Registration will be Wednesday, March 12 (6pm—8pm) & Saturday March 15 (9am—12pm). Try-out locations will be sent via e-mail after we receive your registration.

PRICE SCHEDULE	
The following discounts apply for multiple players from the same family:	
# Players from Same Family	Cost Per Player
1	\$130
2	\$120
3	\$110
4	\$100

Registration is \$130 for individuals and a check can be made out and mailed to Competitive Basketball League, P.O. Box 6086, Kingwood, Texas 77325. Please complete the form below with your registration. If the league is full, your check will be returned. For more information, you can call (281) 744-1321 or visit our web site at [www.cbball.com](http://www.cbball.com).

We look forward to having a lot of fun and a great program for the kids.

CUT AND KEEP ABOVE INFORMATION

## REGISTRATION FORM

PLAYER'S NAME \_\_\_\_\_ Check one:  BOY  GIRL  
 PHONES (H) \_\_\_\_\_ (O) \_\_\_\_\_ (C) \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_  
 E-MAIL: \_\_\_\_\_  Check here to receive e-mails notices from CBL  
 DATE OF BIRTH \_\_\_\_\_ AGE \_\_\_\_\_ HT \_\_\_\_\_ WT \_\_\_\_\_  
 SCHOOL \_\_\_\_\_ PARENT'S NAME \_\_\_\_\_  
 CHILD'S YEARS OF EXPERIENCE AS A PLAYER \_\_\_\_\_ GRADE \_\_\_\_\_  
 I would like to be a coach  YES  NO  
 The undersigned being the parent or legal guardian of the player named above, hereby agrees to hold The Competitive Basketball League, its officers, directors, and coaches faultless in the event of injury or other harm occurring to the child during the participation of all League events including practices. Parent or guardian assures the League that adequate medical insurance is available and if necessary will be responsible for any medical expenses.  
 SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_ S07