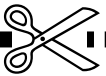


Application Below

The Anchorage School District does not endorse these materials or the viewpoints expressed in them.



ACS JAM Application

Number of years your child has played basketball _____ Age on Jan 1, 2010 _____

Child's Name _____ Birth Date _____

Current Grade _____ School Attending _____

Parent's Name _____ e-mail _____

Address _____

—

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

JAM League Agreement

I, _____ the participant, do agree to abide by the rules and regulations set up by the Anchorage Christian Schools JAM League.

I, _____, as the parent/guardian do hereby agree to abide by the rules and regulations set up and administered by the Anchorage Christian Schools JAM League. I further agree to accept complete responsibility in matters of physical injury or loss that might result from such participation in games, practices, or travel to and from activities. I further agree that in the event of such injury or loss, there shall be no liability on the part of the Anchorage Christian Schools JAM League/ Anchorage Baptist Temple. I have read and understand the purpose and objectives of the Anchorage Christian Schools JAM League program which is based on fun, safe and fair play in a Christian environment.

JAM Sports Medical Release

In case of emergency, I authorize the Anchorage Christian Schools JAM League to give, obtain, or seek appropriate medical or surgical care for the above applicant. In the event I cannot be reached, it is understood that a conscientious effort will be made to locate me or my son/daughter's emergency contact person.

Parent/Guardian Name _____ Phone number _____

Emergency Contact Person _____ Phone Number _____

Parent's Signature _____ Date _____

**Make Checks payable to Anchorage Christian Schools
Return application to any ACS Office/ Questions - Call - 830-5930**



ACS JAM

Elementary Basketball League Begins Jan 8 & 9

Boys and Girls Grades 1 - 6

Division 1 - Co-ed 8 years or under Boys - must be at least in 1st grade
9 years or under Girls - must be at least in 1st grade

Division 2 - 10 years or under Boys - must be at least in 3rd grade



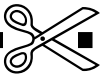
January 8 and 9 are opening days of the 2010 ACS Elementary Basketball League. There will be an opening day clinic for the purpose of placing each player on a team. This is not a try out. All players who sign up will be placed on a team.

Jan 8 - Division 4 will start at 7:00 p.m.

Jan 9 - Division 1 will start at 9:00 a.m., Division 2 will start at 12:00 p.m., Division 3 will start at 3:00 p.m.

This is an 8 week league with a tournament at the end. There will be one practice a week in the evening. Practice nights will be Mon, Tue., Thurs., or Fri. with each coach choosing a night for his or her team. Practices will be at ACS Gyms. Games will be played on Saturdays in the ACS Gyms. All players must be present on the 8th or 9th to be placed on a team. **If they are not present they will be put on a waiting list.** Additionally, if your league fee is not paid at the time the application is submitted you will be placed on a waiting list. There will be No Refunds.

**All players must be present for opening Day Clinic
Keep this top half as a reminder of start times**



ACS JAM Application

Deadline is Dec 18.....after Dec. 18 price goes up \$10.00

**Fees are not refundable
Recreation League - \$130.00 per player**

Check the division your child is applying for:

- Division 1 - Co-ed** 8 years or under Boys - must be at least in 1st grade
9 years or under Girls - must be at least in 1st grade
- Division 2 - 10 years or under Boys - must be at least in 3rd grade**
- Division 3 - 12 years or under Girls - must be at least in 4th grade**
- Division 4 - 12 years or under Boys - must be at least in 5th grade**

Contact Dave Duncan for more information 830-5930

Coaches Needed

If you are interested in coaching a team, please indicate below or contact Dave Duncan - 830-5930
e-mail dduncan@acsedu.org Mr. Duncan will contact you.
Each head coach is allowed one free child.

Name _____ Division desired _____

Work Phone _____ Home Phone _____ Cell Phone _____

e-mail _____

Father/Mother or Relative of (if applicable) _____

(Participant's Name)