



IE-Sports ~ Inhertwined Entertainment, Inc.

P.O. Box 2402 • Washington, DC 200013
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WOMEN'S BASKETBALL LEAGUE REGISTRATION (To be filled out by INDIVIDUAL or TEAM SPONSOR. If you are the team sponsor, complete the following section in reference to yourself.)

First Name	Last Name
Date of Birth (mm/dd/yyyy)	Applicant: <input type="checkbox"/> Team <input type="checkbox"/> Individual
Home Address:	City: State: Zip:
Home Phone:	Work/Daytime Phone:
Email address:	Cell Phone:
Name of Employer:	Employer Phone:
Employer Address:	
Emergency Contact Name:	Relation:
Contact Home Phone:	Contact Work Phone:

If you are entering this league as an individual, please check your highest level of experience.
 Intermediate Recreational

Desired Position: _____ (Individual registrants will be placed on teams based on experience and position.)

Players experience: (Please check all that apply)	Played professionally	Played in college (Please enter school name)
	Played in high school	Organized experience

TEAM APPLICATION (To be filled out by TEAM REPRESENTATIVE/SPONSOR ONLY)

(1) If you are mailing, send this application with either full payment of \$800.00 or a \$400 deposit. *Money Orders or Cashier Checks ONLY. Team deposit is **non-refundable and non-transferable**. Balance of payment is due prior to league start date. Make checks payable to Inhertwined Entertainment, Inc. (2) If you are paying by credit card, fill out credit card information below. (3) If you are faxing, you will receive a confirmation email with instructions on how to pay registration fee/deposit.

Team Name:	How many years has your team played together?
Last league played in together	Year

INDIVIDUAL APPLICATION

(1) If you are mailing, send this application with an individual league fee of \$85.00. Money Orders or Cashier Checks ONLY. Please make checks payable to Inhertwined Entertainment, Inc. (2) If you are paying by credit card, fill out credit card information below. **League fee is non-refundable and non-transferable**. (3) If you are faxing, you will receive a confirmation email with instructions on how to pay registration fee/deposit.

All Registrants Must Read and Complete Page 2 of this Form

PAYMENT METHOD Mastercard Visa Cash Check

Credit Card Number	Expiration Date
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FOR OFFICE USE ONLY			
Fees Paid	Date	Receipt #	Staff

* In the event a team cannot play in the league for any reason, their \$400 deposit or \$400 of the full payment will be withheld by Inhertwined Entertainment, Inc.

Team Roster (This form must be read, completed in full and signed by all players. Individual registrants should fill out line 1.)

Participant Waiver and Release: Each team member and/or participant (hereafter referred to as "Participant") listed on the roster below or added to the roster at a later date, intending to be legally bound, hereby certifies that she is physically fit and in normal health and has not been otherwise informed by a physician that she is incapable of participation in any sport leagues/clinics/tournaments in affiliation with IE Sports (Inhertwined Entertainment, Inc.) (hereafter referred to as "IE Sports", including, but not limited to flag football, tennis, soccer and basketball). Each participant agrees to abide by all IE Sports rules. Each Participant acknowledges that she is aware of the risks inherent in participation in sports (both practice and competition); that sports are physical and can require considerable running, starting, stopping and physical exertion, in heat and humidity, and could potentially lead to injuries including, but not limited to, overheating, dehydration, limb injuries and possible permanent disability and death; each participant agrees to assume all those risks and to waive any and all rights to claim for injuries, loss or damages arising out of her participation in sports at IE-Sports Basketball League. Each participant is responsible for conduction herself safely and at a level consistent with her skill. Each participant further certifies that she maintains adequate health insurance to cover any injuries occurring as a result of participation in sports affiliated with IE-Sports. If, while participating in a sport in the IE-Sports Basketball League, a participant hurts another person or damages the property of another individual, she will pay that individual any resulting cost. By signing below, participant acknowledges understanding and reading of this waiver in full.

Player Name (Print)	Player Signature	Email Address	Age	Height	Cell Phone	Home Phone	Emergency Contact
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							