



2021 FALL MEN'S 5 on 5 FULL COURT BASKETBALL LEAGUE

Thank you for your interest in our adult men's 5 on 5 leagues. Sport Axis offers Sunday night recreational men's 5 on 5 basketball leagues for the fall/winter, spring and summer seasons. This registration packet lists information for our 2021 FALL season. **ONLY COMPLETED REGISTRATIONS*** will be accepted. (*all player information and signatures will be required at the time the packets are turned in – **NO EXCEPTIONS**. Registration ends October 10th, 2021 although leagues may fill prior to October 10th.

TO APPLY TEAM MANAGERS MUST SUBMIT:

- Team application Completed team roster Signed and initialed waivers Fees (\$750)

Registration

Priority for returning teams	Now through October 3rd, 2021
Open Registration	October 17 th – December 19 th (Excludes 10/31, 11/28)
Closing date	October 10 th , 2021 (or when league is full)
Registration Options	Email: garret@sportaxis.com Complete online: www.sportaxis.com/bballleague Drop off packet: Coordinate via email or phone

- **ANY INCOMPLETE REGISTRATION PACKET WILL BE REJECTED** until complete with player information and signatures.
- Space available on first come first serve basis and/or may fill prior to Oct. 10th registration closing date
- Team Managers must confirm receipt of e-mailed registrations (staff is not responsible for lost packets sent via e-mail)

League Information

LEAGUES	SUNDAY 5 ON 5 (Lower & Upper)	
Divisions	Lower, Upper	Season Dates 10/17/21 – 12/19/21
1 st game	October 17 th , 2021	
Game times	1 st games 6:00pm	
Playoffs	December 12 th , 2021	
# of Games	8 games (6 regular + 2 playoffs)	
No Game Dates	N/A	
Fees:	\$750	

- All games played at Sport Axis Facility
- Leagues offered are subject to change depending on the number of teams that register
- Leagues may be combined if registration is low (at approval of teams registered)
- Dates and times are subject to change (at approval of teams registered)
- Fees payable by check (one payer), cash, PayPal, Venmo, Visa or MasterCard
- A player can only play on ONE team per league per night
- All teams must have #'d jerseys (on backside) and similar colored jerseys at start of the season.

NOTE: Next season offered: 2022 winter leagues (Sunday); starts in January. For questions or to be added to free agents list, added/dropped from mailing list, email: garret@sportaxis.com

Sport Axis
2400 Industrial Ln #1150, Broomfield, CO 80020
(720) 443-1301



2021 FALL MEN'S 5 on 5 FULL COURT BASKETBALL LEAGUE REGISTRATION FORM



This form can be completed online through www.sportaxis.com/bballleague

To be submitted with completed team roster, waiver and league fees. NOW THROUGH October 10th, 2021 (or until league is full, whichever occurs first). PLEASE PRINT CLEARLY.

TEAM NAME _____

MANAGER _____

ADDRESS _____

CITY _____ ZIP _____

PHONE _____ Mobile Home Work

E-MAIL (Required) _____

Person to be called on roster in case manager is not available

NAME _____

PHONE _____ Mobile Home Work

E-MAIL (Required) _____

If a new team, other leagues played in:	
City & Level: _____	
Approx. Record: _____	
CHECK ONE:	Separate registration needed for each league night
	_____ Sunday League
CHECK ONE:	Based on skill level -
	_____ Division 1 – Competitive (top skill level) - Upper
	_____ Division 2 - Recreational (good to average skill level) - Lower

PAYMENT \$750: Cash Check Credit Card (Call to place) Venmo PayPal

AUTHORIZED SIGNATURE _____

PAYMENT MUST BE MADE TO COMPLETE REGISTRATION PACKET



2021 FALL MEN'S 5 on 5 FULL COURT BASKETBALL LEAGUE REGISTRATION FORM



TEAM ROSTER FOR _____

Note: players can be on the roster of only one league team per night. We, the undersigned, agree to play with the above-named team, and to comply with the rules of the Sport Axis Adult Basketball League.

- A. A legal roster will include all information asked for including unlisted telephone numbers and a minimum of 8 signed players, accompanied by a signed Release of Liability form for each player and non-playing team member (manager, etc.). Information must be correct as of the roster due date. On any roster, players with missing information will be ineligible until missing items are completed.
- B. If any team is found to be playing with an illegal player, that team will forfeit the game.
- C. All players are required to carry valid identification (i.e., driver's license) to all games and to present same, upon request, to verify eligibility.

Name (print):	Home Phone:	Cell/Alternate:
Street Address:		
City/State/Zip:	Birthdate:	DL#:
Name (print):	Home Phone:	Cell/Alternate:
Street Address:		
City/State/Zip:	Birthdate:	DL#:
Name (print):	Home Phone:	Cell/Alternate:
Street Address:		
City/State/Zip:	Birthdate:	DL#:
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Name (print):	Home Phone:	Cell/Alternate:
Street Address:		
City/State/Zip:	Birthdate:	DL#:



**2021 FALL MEN'S 5 on 5
FULL COURT BASKETBALL LEAGUE
REGISTRATION FORM**

Release of Liability

Each player on team must fill out this form
(can be completed online @ www.sportaxis.com/bballleague)

Team Name: _____

Participant's Name: _____

I have voluntarily applied to participate in the Sport Axis Adult Basketball League run by Sport Axis.

I am aware that serious accidents occasionally occur during basketball game activities and that participants occasionally sustain serious personal injury or death and/or property damage as a consequence. I understand that included among the dangerous elements of the sport of basketball is the risk of injury as the result of being struck by another player or equipment. I understand that there is a risk of injury to ankles, knees, and legs along with other parts of the body due to running, jumping, quick and abrupt starts and stops, and that the basketball court and surrounding areas of the court cannot be assured to be free of defects, and that there is the risk of injury as a result of tripping on an unknown hazard on or nearby the court itself. I understand that in addition to the above-mentioned risks, there are unpredictable dangers involved in this sport.

I also certify that I am physically fit; I have sufficiently trained for participation in this league or event and have not been advised otherwise by a qualified medical person.

Medical treatment. I consent to receive medical treatment which may be deemed advisable in the event of injury, accident and or illness during this event.

Photo release. I understand that during the league play or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the league officials, producers, sponsors, organizers, and or assigns.

Rules and Regulations. I agree to abide by the rules and regulations of the Sport Axis Adult Basketball League.

I recognize and acknowledge that there are certain risks with participation in recreation programs. In consideration of my participation in Adult Basketball League activities, I voluntarily release Sport Axis and the team indicated above from liability for property damage, injuries, or death resulting from or in any way connected with that participation (except to the extent caused by the staff's active negligence or willful misconduct). This Waiver and Release is binding on me, my heirs and dependents. (In this document, references to Sport Axis include its officers, agents, employees, contractors and volunteers.)

Signature _____

Date _____