### Whlchr Bsktball black2012 Steve Nash Challenge

### Registration Information

### Event: *Steve Nash Youth Basketball Challenge*

* **Junior Wheelchair Basketball Division**

**Date: March 31 & April 1, 2012 (Saturday & Sunday)
Saturday, March 31: 9:30amm-4:00pm (TBC)
Sunday, April 1: 9:30am-3:00pm (TBC)**

**Event Details: Langley Events Centre
7888-200th St. Langley, BC V2Y 3J4**

BCWBS is hosting a **Junior Wheelchair Basketball Division** in **2012 Steve Nash Youth Basketball Challenge** hosted by Basketball BC. This is an exciting event focused on providing junior players with a positive competition and skill development experience just for them. We will be playing 4 games in the Steve Nash Youth Basketball Challenge which not only wheelchair basketball, but also stand-up basketball as well as Special Olympic basketball will be competing in. This event (wheelchair basketball division) is for youth born January 1, 1994 or later and is played on the lowered – 8 ½ ft basketball hoop height and/or on 10ft hoops pending the number of participants.

**Registration Info:** **The tournament registration fee is $30 per player** and this fee includes your lunch both days, coaching and instruction, and prizes. Please make your cheque payable to the **BC Wheelchair Basketball Society** and send with your registration form **by February 29, 2012**. Players will be evenly divided into teams the day of the event.

**Travel:** Participants from outside of the Lower Mainland should plan on arriving Friday evening, March 30th and depart after 3:00pm on Sunday April 1st, 2012. BCWBS members may apply to receive travel support to this event (accommodation and transport) if traveling from outside of the lower mainland. Contact Makiko for more info.

**Contact Info:** Makiko Harada, Program Coordinator
BC Wheelchair Basketball Society
210 – 3820 Cessna Dr, Richmond BC V7B 0A2 (Effective till Feb 23)
780 SW Marine Dr. Vancouver BC V6P 5V7 (Effective from Feb 24)
Tel: 604-333-3530 Fax: 604-333-3450 (Effective till Feb 23)
Email: makiko@bcwbs.ca [www.bcwbs.ca](http://www.bcwbs.ca)

****

****2012 Steve Nash Youth Basketball Challenge
Junior Wheelchair Basketball Division

**REGISTRATION FORM**

|  |
| --- |
| Name:  |
| Address: |
| Phone: Email: |
| Disability: 🔿 Yes 🔿 No Please specify: Date of Birth: |
| Do you need to borrow a sports wheelchair? 🔿 Yes 🔿 No |
| Do you have any medical concerns regarding your current health status? If yes please describe: |
| Do you have any special dietary requirements? If yes please specify:  |
| Are you requesting a travel subsidy available for BCWBS Members for accommodation or transportation if traveling from outside of the lower mainland? 🔿 Yes 🔿 No |
| Registration fee enclosed: 🔿 cash 🔿 cheque (payable to BC Wheelchair Basketball Society) |
| As a parent of a participant I would be available to volunteer at the event: 🔿 Yes 🔿 No |

## Consent and Waiver

While my child attends the above-named junior wheelchair basketball event held in conjunction with Basketball BC’s Steve Nash Youth Challenge, I assume all responsibility for injury, loss or damage to his/her person or property which he/she might suffer howsoever caused, in connection with his/her participation in this program. In addition, I, for myself, my child, any of my personal representatives, heirs, or successors release and discharge BC Wheelchair Basketball Society, Basketball BC and Wheelchair Basketball Canada from any and all claims and causes of action I may ever have in connection with the above event and waive all of my rights thereto. I also grant the organizers the irrevocable right to use as they see fit for publicity, advertising or related purposes, my child’s name, voice, or physical appearance or comments of my child’s. I acknowledge that I having read and understood the above and agree to each term.

Parent/Guardian Signature Date

*\*We respect your privacy, and will not sell or share your personal information with any other party or organization without your consent.*

**Please return to Makiko Harada, Program Coordinator, BCWBS - DEADLINE: February 29, 2012
210 – 3820 Cessna Dr, Richmond BC V7B 0A2 Fax: 604 333-3450 Email: makiko@bcwbs.ca**