

# Birmingham YMCA's Men's Adult Basketball League



**Dates:** Sept. 12-Nov. 15 **(plus playoffs)**

**Day & Time:** Sundays  
Anytime from 3:00-10:00 p.m.

**Registration Ends:** Tuesday, Sept 7th

**Registration Begins:** NOW!

**Location:** Birmingham Family YMCA's Gym

**Ages:** 18 and over

**Cost:** Team \$300.00 plus a \$50.00 deposit  
**Ref Fees Not Included:** Separate (see details on league)

**Special Notes:**

**\*\*this league is open to the public. One does not need a facility or program membership**

**\*\*we are only taking in full teams. No individual registrations**

**Program Table File:** 03-631-02 **Team Registration**

- Every team will need a captain who is responsible for communicating information to their teams throughout the season
- Teams should have a minimum of 7 and a maximum of 10 players.
- Scores and standings will be kept
- **Price does not include ref fees. Every team must pay a ref. fee of \$25.00 before the game. MUST BE CASH!**
- No membership is required
- Every participant must purchase a reversible jersey for \$15.00 **or teams may provide their own jersey with numbers on them**
- A deposit of \$50.00 is due at the time of registration for teams. The remaining team fee is due the evening of the first game.
- **All players must be listed on the team roster to be eligible to play. Rosters must be finalized before the second game of season.**
- **Dunking is allowed.** However, **no hanging on the rims** before, during or after the games. No profanity.
- High School Rules
- One will not play unless they have paid and are listed on team rosters
- Players must respect referees at all times
- 1st offense-technical, 2nd offense-player suspension of games
- No refunds given!



**Birmingham Family YMCA**  
400 East Lincoln Street  
Birmingham, MI 48009  
248-644-9036 (phone)  
248-644-8378 (fax)  
www.ymcadetroit.org

Team Registration or Individual Registration (circle one)

Team Name: \_\_\_\_\_

Participant's Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**How did you hear about the league? (circle everything that applies)**

Website      at the YMCA      Friend/Word of Mouth      Newspaper      YMCA E-Mail      Other: \_\_\_\_\_

**Do you need a YMCA Reversible Sports Jersey:** YES      or      NO      (*Jerseys are \$15*)

**Every team needs a captain. I would like to be a captain.**

Yes      No

Volunteer's Name: \_\_\_\_\_

**I have been properly screened and there are no medical conditions or injuries that preclude his/her participation in sports.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_