FALL/WINTER 2025-26 (AUGUST 2025 - MARCH 2026)
LIONS BASKETBALL REGISTRATION

Today's Date _____ /_____ /_____

Player Name _____ Birth date ____ /____ /____ Age_____ Grade*_____
*As of Fall 2025

Address_____ Home #_____

Parent 1 _____ Cell #_____ email _____

Parent 2 _____ Cell #_____ email _____

☐ Member ☐ Non Member ☐ New to Program ☐ Returning Player *Played in the 2024-25 season School_____

PRIMARY JCC MEMBER NAME: _____ CATEGORY: ☐ Young Adult ☐ Family ☐ Single Parent Family

For information about JCC Membership contact Member Services at 402-334-6426.

UNIFORM $70 *For New Players or those who wish to purchase a new uniform. DUE AT REGISTRATION in addition to deposit, if applicable. One time fee.*

Shorts	Jersey
	Current JCC Jersey #_____ Preferred Jersey #_____
YOUTH: ☐ Small ☐ Medium ☐ Large	YOUTH: ☐ Small ☐ Medium ☐ Large
ADULT: ☐ Small ☐ Medium ☐ Large ☐ XL	ADULT: ☐ Small ☐ Medium ☐ Large ☐ XL

SHOOTING SHIRT $30 Long Sleeve Dry Fit *(Optional. DUE AT REGISTRATION in addition to deposit, if applicable.)*

YOUTH: ☐ Small ☐ Medium ☐ Large ADULT: ☐ Small ☐ Medium ☐ Large ☐ XL

FALL/WINTER: 3RD BOYS, 3RD-8TH GIRLS As of Fall 2025

3RD GRADE BOYS as of Fall 2025

☐ Member $650 ☐ Non Member $750 17-003

LADY LIONS 3rd-8th Grade Girls, as of Fall 2025

☐ Member $650 ☐ Non Member $750

☐ 3rd Grade 17-0023	☐ 5th Grade 17-0025	☐ 7th Grade 17-0027
☐ 4th Grade 17-0024	☐ 6th Grade 17-0026	☐ 8th Grade 17-0028

PAYMENT *Full payment must be made at time of registration or by Friday, August 8, 2025*

PROGRAM FEE

☐ Member $_____

☐ Non Member $_____

UNIFORM *(If applicable, one time fee)* $70

SHOOTING SHIRT *(Optional)*

____QTY x $30 *ea.* $_____

TOTAL $

Cost includes weekly practices, coaching fees, open gym time, tournament fees, and skill clinics*. Uniform not included. Additional uniform fee for new players or those who wish to purchase a new uniform. *If applicable.*

FALL/WINTER: 4TH-8TH BOYS Grade as of Fall 2025

☐ 4th Grade 17-004	☐ 7th Grade 17-007
☐ 5th Grade 17-005	☐ 8th Grade 17-008
☐ 6th Grade 17-006	

4TH-8TH BOYS PAYMENT

MEMBER	NON MEMBER
☐ $760 *2025-26 season	☐ $990 *2025-26 season

DEPOSIT*: $250 *(non-refundable)* *4th-8th Grade Boys only

***A $250 deposit per player is due at registration or by August 8**, to secure your child's spot on a team. **Deposit payment must be made by credit card or check.** Full payment can be made at time of registration.*

Balance after deposit: $510

*If only paying deposit of $250 at registration, the remaining amount will be split into 3 equal payments and processed on Oct. 1, Nov. 1, and Dec. 1, 2025 by automatic bank withdrawal or credit card. A method of payment must be kept on file if only paying the deposit. Payment must include the amount of the deposit, uniform and shirt (if applicable). **All fees must be paid in full by December 1, 2025.***

☐ Payment Plan
☐ Full Pay
_____INITIAL

Balance after deposit: $740

*If only paying deposit of $250 at registration, the remaining amount will be split into 3 equal payments and processed on Oct. 1, Nov. 1, and Dec. 1, 2025 by automatic bank withdrawal or credit card. A method of payment must be kept on file if only paying the deposit. Payment must include the amount of the deposit, uniform and shirt (if applicable). **All fees must be paid in full by December 1, 2025.***

☐ Payment Plan
☐ Full Pay
_____INITIAL

REGISTRATION FOR ALL PLAYERS DUE:
FRIDAY, AUGUST 8, 2025

***DUE AT REGISTRATION in addition to deposit**, if applicable.*

☐ **UNIFORM** *(If applicable. One time fee.)* $70

☐ **SHOOTING SHIRT** *(Optional)*
____ QTY x $30 *ea.* $_____

GRAND TOTAL
Amount included with registration $_____ $_____

PLEASE COMPLETE BACK OF REGISTRATION FORM

Staenberg Omaha JCC
Staenberg Kooper Fellman Campus
333 S. 132nd St • Omaha, NE 68154
402.334.6426 | www.jewishomaha.org

JCC USAGE _____INITIAL

I have requested permission to use the services and equipment of the fitness facility and/or participate in programs at the Staenberg Omaha JCC (the "JCC") located in Omaha, Nebraska. I acknowledge that the use of services and facilities and/or participation in programs is subject to the JCC rules and regulations, as modified from time to time, with which I agree to comply.

It is understood and agreed that the JCC reserves the right to revoke any membership or terminate any program participation, in the event of inappropriate behavior, failure to follow safety rules and/or disruptive behavior to members or staff, and/or failure to remain current on membership or program obligations.

NON MEMBER USAGE _____INITIAL

Non member players will have limited access to the JCC Campus. Non member players are ONLY allowed to participate in JCC Basketball programming. The basketball gymnasium will be available for non member use ONLY during scheduled select basketball practice, open gym, skill clinics or game times. Non member players who wish to use the JCC at any other times will be subject to a $12.00 guest fee per day. Questions regarding JCC membership may be directed to Member Services at 402-334-6426.

PARENT PERMISSION _____INITIAL

As the parent/legal guardian of the child/children listed on this application, I take full responsibility for the actions of the child/children. I have signed this parent permission form and understand that I am fully responsible for their actions. I hereby give permission for my child(ren) to participate in JCC activities. In the event that I cannot be reached, I hereby give permission to the JCC to act on my behalf to have medical treatment administrated to my child(ren) in the event of an emergency. I understand that I will be fully and directly responsible for the cost of medical attention. I further understand that theJCC reserves the right to restrict or to remove persons from activities when appropriate.

PAYMENT FEES _____INITIAL

I have read the payment information and I assume financial responsibility for all Select Basketball fees. Should you elect to pay by installment, please make payment arrangements with the Client Service Manager at 402-334-6452 so that your payments are received before payment due date. I understand that failure to pay fees by the due date will result in loss of play time for my child. Fees are nonnegotiable/nontransferable. Refunds will not be given if your child chooses not to finish the season. There are no fee reductions for absences, family vacations or holidays.

RELEASE _____INITIAL

I understand that any JCC activity and use of recreational and workout facilities involves the risk of accidental injury despite all safety precautions. On behalf of myself and my family, as a consideration and a condition of my/our participation in the JCC Basketball program, I understand that attending and using the facilities of the JCC is done at my/our own risk. I/we agree that I/we will not hold the JCC responsible for any damages arising from any injury or loss sustained or incurred by me/my family caused by any negligence or gross negligence in, on, or about the premises of the JCC.

PUBLICITY/PROMOTIONS _____INITIAL

The JCC reserves the right to photograph members and guests and use these photographs for marketing purpose, including but not limited to insertion on the JCC's website, newsletters, program promotions, Facebook page and other social media networks.

ADDITIONAL CONDITIONS _____INITIAL

Criminal History: The applicant acknowledges that it is the policy of the JCC to deny participation in JCC programs to any individual convicted of a sexual offense.

Cell Phone/Video Taping: Due to advances in video equipment and telephone video technology, and for the safety and security of our members and guests, any and all video equipment may not be used in locker rooms, dressing areas, shower areas, restrooms, or other areas generally deemed to be "private" within JCC facilities.

I/WE HAVE CAREFULLY READ THIS INSTRUMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM/WE ARE AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT WITH JCC, AND HAVE SIGNED IT OF MY/OUR OWN FREE WILL.

Sign_____

Print_____ Date_____/_____/_____

PAYMENT OPTIONS

☐ **VISA** ☐ **Mastercard** ☐ **Discover**

Card#_____

Exp. Date_____ CVV#_____

Billing Zip Code: _____ (required)

☐ **Charge to my credit card on file at the JCC**

Bank Draft: ☐ Checking ☐ Savings

Bank_____

Routing #_____

Account #_____

A method of payment must be kept on file if only paying the deposit. If full payment is not made at the time of registration, an automatic withdrawal will be setup using the credit card number or routing and account number used for the deposit.

FOR OFFICE USE ONLY

DATE RECEIVED_____ PAYMENT PLAN_____ DEPOSIT RECEIVED_____ INITIALS_____

Minor Participant Waiver, Release, Indemnification of All Claims & Covenant Not to Sue

PLEASE READ CARFULLY. THIS DOCUMENT EFFECTS YOUR LEGAL RIGHTS AND IS LEGALLY BINDING. BY SIGNING THIS AGREEMENT YOU ARE RELEASING OMAHA JCC FROM ALL LIABILITY AND FOREVER GIVING UP ANY CLAIMS THEREFORE

Assumption of Risk

I, in my legal capacity as the parent/guardian of the minor named below ("Minor"), acknowledge and agree that any use of The Omaha JCC facilities, services, equipment and premises ("Facilities") and any participation in The Omaha JCC programs and activities ("Programs") comes with inherent risks including, but in no way limited to: (1) moderate and severe personal injury, (2) property damage, (3) disability, (4) death, and (5) sickness or disease. I voluntarily, for myself and Minor, accept and assume full responsibility for these risks as well as any and all other risks of the use of Facilities and participation in Programs. I agree that I have full knowledge of the nature and extent of all such risks and am not relying on all such risks being described in this document.

Waiver, Release, Indemnification & Covenant Not to Sue

In consideration of Minor's use of Facilities and participation in Programs I, in my legal capacity as parent/guardian of Minor, agree on behalf of myself and Minor that The Omaha JCC, it's officers, directors, agents, employees, volunteers, insurers and representatives ("Releasees") will not be liable for any personal injury, property damage, disability, death, sickness or disease incurred by Minor, however occurring including, but not limited to, the negligence of Releasees. I understand that Minor and I will be solely responsible for any loss or damage, including personal injury, property damage, disability, death, sickness or death sustained from the use of Facilities and participation in Programs.

I further agree, in my legal capacity as the parent/guardian of Minor, on behalf of Minor, myself, and any and all legal successors and proxies, to release and **HEREBY DO RELEASE, WAIVE AND COVENANT NOT TO SUE** Releasees from any causes of action, claims, suits, liabilities or demands of any nature whatsoever including, but in no way limited to, claims of negligence, which Minor, myself, and any and all legal successors and proxies may have, now or in the future, against Releasees on account of personal injury, property damage, disability, death, sickness, disease or accident of any kind, arising out of or in any way related to the use of Facilities or participation in Programs, whether that participation is supervised or unsupervised, however the injury or damage occurs, including, but not limited to, the negligence of Releasees.

In further consideration of the use of Facilities and participation in Programs, I, in my legal capacity as parent/guardian of Minor, agree on behalf of myself and Minor to **INDEMNIFY AND HOLD HARMLESS** Releasees from any and all causes of action, claims, demands, losses, suits, liabilities or costs of any nature whatsoever, including claims of negligence, arising out of or in any way related to the use of Facilities and participation in Programs.

_____ _____

Minor Name (Print Clearly) Date

_____ _____

Parent/Guardian Signature Parent/Guardian Name (Print Clearly)