**2025 – 2026**

**Registration Packet**



**2025-2026 Central PA Lions**

**Registration Form**

**Registration Fee:** There is a **non-refundable fee** for student-athletes to participate to cover program costs (e.g., uniforms/practice gear, tournament fees, gym fees – if applicable, administrative fees, etc.) for the Central PA Lions program. The fee for this year(5 year Anniversary Prices) is **$400 (individual)**; **$700 ( 2 persons from the same family); $1,050 ( 3 persons from the same family)**. If you are unable to pay some of this fee, please contact Coach Anderson. We do not want any student-athlete to miss out on this great opportunity due to financial hardships. There are a few partial scholarships available that can be utilized. These scholarships are made available from caring members of the program and community.

PLEASE LEGIBLY COMPLETE ALL FIELDS.

Forms will be returned if ANY fields are left blank. No refunds will be issued.

**Student-Athlete’s First Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_ **Student-Athlete’s Last Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent’s First Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Parent’s Last Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent’s First Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Parent’s Last Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**City**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **State**:\_\_\_\_\_\_\_\_ **Zip**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Phone**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell Phone**:\_\_\_\_\_\_\_\_\_\_\_\_\_ **Business Phone**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**School**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Current Grade**:\_\_\_\_\_\_\_\_\_\_\_\_

**Height**:\_\_\_\_’\_\_\_\_ **Date of Birth**:\_\_\_/\_\_\_\_/\_\_\_\_ **Did you play last year?** ☐ **Yes** ☐ **No**

 (Feet) (Inches) (Month) (Day) (Year)

**Please rate your student-athlete’s playing ability: Sex:** ☐ **Male** ☐ **Female**

☐ **A (dominant)** ☐ **B** ☐ **C** ☐ **D (developing)**

**Parent/Guardian Signature**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**UNIFORM SIZES – Please select one.**

Players will be provided two uniforms within the cost to play.

☐ **Youth 8** ☐ **Youth 10** ☐ **Youth 12** ☐ **Youth 14** ☐ **Youth 16** ☐ **Youth 18**

☐ **Men’s S** ☐ **Men’s M** ☐ **Men’s L** ☐ **Men’s XL** ☐ **Men’s 2XL**  ☐ **Other:**\_\_\_\_\_\_\_\_\_

 **(34-36) (38-40) (42-44) (46-48) (50-52)**

☐ **Women’s S** ☐ **Women’s M** ☐ **Women’s L** ☐ **Women’s XL** ☐ **Women’s 2XL** ☐ **Other:**\_\_\_\_\_\_\_\_\_

 **(4-6) (8-10) (12-14) (16-18) (20)**

**Returning player’s uniform number:** \_\_\_\_\_\_\_

**New player’s top three choices for uniform number:** \_\_\_\_\_**;** \_\_\_\_\_\_**;** \_\_\_\_\_\_

**How do you hear about us?** ☐ **School** ☐ **Friend** ☐ **Neighbor** ☐ **Internet**

☐ **Newspaper**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐ **Other**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2025-2026 Central PA Lions**

**Program Acknowledgement**

**Date**:\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Student-Athlete’s First Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_ **Student-Athlete’s Last Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_

WE, THE UNDERSIGNED STUDENT-ATHLETE AND PARENTS, ACCEPT AND ACKNOWLEDGE:

1. First and foremost, expect to HAVE FUN, BELIEVE IN YOURSELF, YOUR TEAMMATES, AND YOUR COACHES! We expect camaraderie, loyalty, honesty, ownership, and accountability to your team, your coaches, your parents, and yourself.
2. Each student athlete will pay a Central PA Lions **non-refundable** registration fee for the spring 2025 season of **$400 (individual)**; **$700 (2 persons from the same family); $1,050 (3 persons from the same family)**. The registration fee is non-refundable and is due upon enrollment in the program. As a team, we will be conducting fundraisers for our program. **The fundraiser opt-out fee is $200**. The student athlete and parents understand that tournament cancellations or prices may change which are out of the control of the coaches and the Central PA Lions program. In addition, if the team(s) are invited to play in additional tournaments, it is the responsibility of the parents/student-athletes to cover the costs of additional tournament fees. Specific team fundraisers may cover these additional costs or the parents of the student-athlete may pay the costs at the time of tournament registration.
3. The Central PA Lions program is classified as a **travel team** and ***not an AAU team***. We will play against the best AAU teams on the East Coast. To keep the cost down, this seems to be the best way to compete against the best AAU teams around. In addition, the Central PA Lions program does not authorize the expenditure of funds for food, lodging or other travel expenses related to any team, player, or coach. All travel expenses shall be the responsibility of the individual student-athlete, families, and undersigned.
4. Every effort will be made to provide playing time for each student-athlete in each game, although this is not guaranteed. All student-athletes will contribute to the team’s performance and will be treated with respect.
5. Practices: Due to the competitive nature of our program and their associated games, the coaches stress and require the need for a full commitment from the parents and student-athletes by making attendance at practices and the league/tournament games a high priority (non-spring athletes). We want to build the most competitive student-athletes and teams that we can. With this in mind and as we begin the season, student-athletes and parents should be aware that the student-athletes will spend a lot of time in the gym, and travel with practices 2 to 3 times a week at various locations.
6. It is agreed that student-athletes and parents will accept constructive criticism from the coaches in a positive way and demonstrate a positive attitude toward all teammates, coaches, and game officials. Coaches and staff members will always be available by appointment to discuss any concerns or grievances the parents or student-athletes may have. This will be done in an orderly, calm, and respectful fashion and in a private setting. Absolutely no **problem** or **grievance** issues will be discussed at any public setting, tournament, game, practice or any other public forum. This includes ALL social media accounts.
7. In addition to the expectations at practice and games, we value academic commitment, and with the help of parents, all coaches will follow the academic progress of student-athletes to ensure that they are meeting their responsibilities in the classroom. If failure to maintain above average grades, the student-athlete will be subject to suspension until academic expectations are satisfied.
8. Sportsmanship, Desire, Respect, and Responsibility. Show camaraderie and loyalty. Speak positively to and about teammates. The time and place to discuss differences is always in private, calmly, and focused on team goals. Play with sportsmanship! Never show an opponent up with words or gestures; let your game speak! Practice so hard that when you step onto the court you always out hustle the opposition. Deserve victory! As a student-athlete, you will respect and protect the facilities where you practice and play games. You will report to your coach any damage that occurs that you witness. Student-athletes will gather their belongings and clean up the gym after every practice and/or game.
9. When available, parents agree to assist in any way possible for the benefit of the student-athletes and the team. This may include: assisting in team fundraising; volunteering time to help the coaches; assisting in scorekeeping; stats or video; helping with travel arrangements; and any other assistance that may be needed.
10. Uniforms issued to student-athletes by the Central PA Lions program are required to be maintained in good condition by student-athletes and parents. Student-athletes and parents agree that they will be responsible to replace, at their cost, any uniform that is damaged or lost. The official uniform issued by the Central PA Lions is required to be worn at all games and tournament events.

I UNDERSTAND and ACCEPT these rules and conditions established by the Central PA Lions.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student-Athlete Signature Date**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student-Athlete First Name Student-Athlete Last Name**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Signature Date**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian First Name Parent/Guardian Last Name**

**Note:** This form must be signed by both the student-athlete and parent prior to any participation with the Central PA Lions. A copy of this agreement will be provided for your records and review.

**2025-2026 Central PA Lions**

**Participation Waiver for Communicable Diseases Including COVID-19**

The COVID-19 pandemic has presented athletic teams across the world with a myriad of challenges concerning this highly contagious illness that primarily attacks the upper respiratory system. Some severe outcomes have been reported in children, and a child with a mild or asymptomatic case of COVID-19 can spread the infection to others.

While it is not possible to eliminate all risk of furthering the spread of COVID-19, the Central PA Lions program will take the necessary precautions and comply with guidelines from the federal, state, and local governments, CDC, PA DOH, as well as the NFHS and PIAA, to reduce the risks to our student-athletes, coaches, and their families. As information regarding COVID-19 is constantly changing, the Central PA Lions program reserves the right to adjust and implement precautionary methods as necessary to decrease the risk of exposure for our student-athletes, coaching staff, and spectators. Some precautionary methods include but may not be limited to:

1. Health screenings prior to any practice, event, or team meeting with participation in the activities being limited and/or prohibited where an individual displays positive responses or symptoms.
2. Adherence to social distancing and promotion of healthy hygiene practices such as hand washing, using hand sanitizer, and coughing or sneezing into the elbow.
3. Intensified cleaning and disinfection of practice equipment.
4. Education to student-athletes and parents on health and safety protocols.
5. Student-athletes and coaches are required to provide their own water bottle for hydration.

By signing this form, the undersigned voluntarily agree to the following waiver and release of liability. The undersigned agree to release and discharge all claims for ourselves, our heirs, and as a parent or legal guardian for the student-athlete named below, against the Central PA Lions program, its Booster Club, successors, assigns, officers, agents, staff members, and volunteers and will hold them harmless from any and all liability or demands for personal injury, psychological injury, sickness, death, or claims resulting from personal injury or property damage, of any nature whatsoever which may be incurred by the student-athlete or the undersigned relating to or as a result of the student-athlete’s participation in the Central PA Lions program during the COVID-19 pandemic.

The undersigned acknowledge that participating in athletic programs, events, and activities may include a possible exposure to a communicable disease including but not limited to MRSA, influenza, and COVID-19. The undersigned further acknowledge that they are aware of the risks associated with COVID-19 and that certain vulnerable individuals may have greater health risks associated with exposure to COVID-19, including individuals with serious underlying health conditions such as, but not limited to: high blood pressure, chronic lung disease, diabetes, asthma, cancer and other medical conditions. While particular recommendations and personal discipline may reduce the risks associated with participating in athletics during the COVID-19 pandemic, the risk of serious illness, medical complications and possible death does exist.

We knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of others, and assume full responsibility for the student-athlete’ participation in athletics during the COVID-19 pandemic. We willingly agree to comply with the stated recommendations put forth by the Central PA Lions program to limit the exposure and spread of COVID-19 and other communicable diseases.

We certify that the student-athlete is in good physical condition or believe the student-athlete to be in good physical condition, and allow participation in this sport at our own risk.

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**Parent/Guardian Signature Date**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian First Name Parent/Guardian Last Name**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student-Athlete Signature Date**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student-Athlete First Name Student-Athlete Last Name**

**2025-2026 Central PA Lions**

**Medical Release Form**

Please legibly complete the form.

**Parents/Guardians**: Please complete this form and return it with your registration packet.

**Coaches**: Please carry this completed form with you to all Central PA Lions practices and games in the event of an emergency.

**Student-Athlete’s First Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_ **Student-Athlete’s Last Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_

**Date of Birth**: \_\_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_\_ **Current Age**:\_\_\_\_\_\_\_

 **(Month) (Day) (Year)**

**Parent’s First Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Parent’s Last Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Phone**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell Phone**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Business Phone:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**City**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **State**:\_\_\_\_\_\_\_ **Zip**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent’s First Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Parent’s Last Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Phone**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell Phone**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Business Phone:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**City**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **State**:\_\_\_\_\_\_\_ **Zip**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MINOR RELEASE**

I give my permission for the minor in my custody to participate in the activity of basketball and hereby waive, release and discharge any and all claims, rights to claims for damages for death, personal injury, or property damage which I may have, or which may hereafter accrue to me, as a result of said minor’s participation in said activity. This release is intended to discharge in advance the promoters, sponsors, Central PA Lions basketball coaches and staff, the officials, and any involved municipalities or other public entities (and their respective agents and employees), from and against any and all liability arising out of or connected in any way with said minor’s participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. I further understand that serious accidents occasionally occur during said activity and that participants in such activity occasionally sustain mortal or serious personal injuries, and/or property damage, as a consequence thereof. Knowing the risks of said activity, nevertheless, on behalf of said minor child, I hereby agree to assume those risks and to release and hold harmless all of the persons or entities mentioned above who, through negligence or carelessness, might otherwise be liable to me, or my heirs or assigns for damages. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns, I agree to accept and abide by the rules and regulations of the Central PA Lions program.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Signature Date**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian First Name Parent/Guardian Last Name**

**2025-2026 Central PA Lions**

**Consent to Treatment of Minor**

In the event of sudden illness, accident, or injury which may occur while said minor is engaged in an activity supervised by TJ Anderson’s Central PA Lions Academy and its representatives, agents, or assignees, when neither parent/guardian or designated family physician can be contacted, I hereby give my consent pursuant to Pennsylvania Civil Code for emergency treatment as shall be necessary under the circumstances by any physician licensed under the laws of the Commonwealth of Pennsylvania.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Signature Date**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian First Name Parent/Guardian Last Name**

**Student-Athlete’s First Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_ **Student-Athlete’s Last Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_

**Physician’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Telephone: (**\_\_\_\_\_**)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Insurance Company:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Type of Coverage:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Policy Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **(HMO; PPO; etc.)**

**Pertinent medical history (e.g., epilepsy; diabetes; allergies; etc.):**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Emergency Contacts & Phone Numbers:**

**Contact #1:**

**First Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Last Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Relationship:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Phone**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell Phone**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Business Phone:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact #2:**

**First Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Last Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Relationship:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Phone**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell Phone**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Business Phone:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2025-2026 Central PA Lions**

**Public Relations/Internet/Photo Release Form**

Our website may include articles and photos involving the Central PA Lions games, activities, awards, and events throughout the season and year. This is an important way to keep our families informed and our community involved. Every effort will be made to protect the individual identity of all of our members involved in the Central PA Lions organization. No telephone numbers or addresses will be placed on the website for public view, and we do not share or sell your contact information to others.

There may be times that some of the Central PA Lions student-athletes and Coaching/Staff members are featured in the local newspapers. We are asking permission to use any photograph on our website, social media accounts, and in publications regarding the Central PA Lions program.

* **I DO** grant permission to the Central PA Lions organization.
* **I DO NOT** grant permission to the Central PA Lions organization.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Signature Date**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian First Name Parent/Guardian Last Name**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student-Athlete First Name Student-Athlete Last Name**

**2025-2026 Central PA Lions**

**Parent/Guardian Code of Conduct**

**Each parent**: Please read, sign, and return this form with your registration packet. The program staff will keep this during the season and reference it, if/when needed.

* I will not use social media outlets to post negative statements about the program, the coaches, the staff, or statements that could create a divide within the program. If I do not follow the rules that are established by our program, I understand that my student-athlete will be asked to leave the program after the first offense.
* During games, I will not act out towards the referees, coaches, and fans in any way that would cause our program to be disqualified from the game, tournament, and/or league play. If you are removed from the gym, your student-athlete will be removed from the program. We ask our student-athletes to exhibit good sportsmanship and to be respectful during games, so we are asking the same from our parents.
* During games, I will not coach my student-athlete from the stands or instruct them to do things. If this happens, we will sit that student-athlete for the game and meet as a coaching staff to discuss removal from the program after the first offense.
* After games, I will wait at least 24 hours before contacting a coach about matters from the game.
* I will participate in **ALL** team fundraising events or pay the opt-out fee of $200. If not, we will ask the student-athlete to be removed from the program after the fundraising event.
* Any physical and verbal altercations among families of our student-athletes will be asked to leave the program.
* During a suspension, I will not use social media outlets to post negative statements about the program, the coaches, the staff, or statements that could create a divide within the program. If I do not follow the rules that are established by our program, I understand my student-athlete will be asked to leave the program.
* I agree to follow **ALL** of the rules of the Central PA Lions program and understand that I can be removed from my team or suspended from the team for violation of the above rules at the coaches’ discretion. Upon completion of any suspension, my conduct will be reviewed by the coaching and program staff. At this time, the coaches and program staff may decide to reinstate me, extend my suspension, or dismiss me from the program.

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**Parent/Guardian Signature Date**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian First Name Parent/Guardian Last Name**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student-Athlete First Name Student-Athlete Last Name**

**2025-2026 Central PA Lions**

**Student-Athlete Code of Conduct**

Student-athletes recognize that participation in the Central PA Lions program is a privilege that necessitates responsible behavior at all times during our season.  The following rules are intended to clarify responsible behavior and to give direction to student-athletes:

1. All student-athletes must exemplify good citizenship in both school and the community and are subject to suspension and dismissal if behavior warrants such action.  Such behavior includes any which reflects unfavorably on the team, the coaches, or the Central PA Lions program and/or which results in criminal penalty or indictment.  This includes, but is not limited to the following: cheating, defiance, lying, disrespect of persons and/or property and possession of unauthorized or stolen property.
2. All student-athletes must meet academic eligibility requirements set forth by your parents/guardians.
3. All student-athletes must attend all scheduled practices and tournaments unless necessary absences have been communicated to the coach.  We understand that student-athletes may participate in multiple sports during one season.  The high school sport that is in season takes precedence; however, absences still need to be communicated to the coach.
4. All student-athletes must refrain from using alcohol, tobacco, or other unauthorized substances, and refrain from any display of poor sportsmanship, and/or use of vulgar language at practices and tournaments.
5. All student-athletes must adhere to the curfew of 11:00pm at all tournaments.  Student-athletes need to properly rest their bodies for the amount and type of basketball that we play.  Additionally, boys and girls, unless of the same family, are to remain in assigned rooms after curfew.
6. All student-athletes will not wear any jewelry during any game.
7. All student-athletes are responsible for lost equipment/gear and are expected to return or replace lost or damaged equipment/gear.
8. All student-athletes are expected to:
	1. Demonstrate respect for fellow teammates, coaches, game officials, and opponents.
	2. Demonstrate loyalty to the team and coaches.
	3. Demonstrate control over emotions and conduct themselves in an appropriate manner as an official representative of the Central PA Lions.

I agree to follow all of the rules of the Central PA Lions program and understand that I can be suspended or removed from the team/program for any violation of the above rules.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Student-Athlete Date**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Printed First and Last Name of Student-Athlete**