

2025 S.W.I.S.H. BOYS BASKETBALL LEAGUE

(S.W.I.S.H. – Skagit, Whatcom, Island, Snohomish Hoops)

★ ★ THE LARGEST BOYS BASKETBALL ★ ★

★ ★ PROGRAM IN THE AREA ★ ★

INDIVIDUAL PLAYER REGISTRATION

➔ Individual Entry Fee: \$165.00 (Available to Skagit County Residents Only)

- Individual Entry is for ALL Skagit County residents as a registration option, regardless whether your community has a separate organizing association. However, we may not have other kids from your community to place players with if your community has a separate organizing association (i.e. we'll combine communities for a team as needed). Our goal with the individual entry option is to give all kids an opportunity to play.
- Individuals will be placed on teams based on Skagit County community and/or school as much as possible.
- Teams will most likely practice in Mount Vernon on weeknights, as well.
- See separate [Community Association Page](#) to see if your community has an alternate registration option!

➔ Season runs January 11th through March 15th.

- Registrations are requested by December 6th. Late registrations will be accepted only if space is available.
- All games on Saturdays in Skagit County.

➔ Grade Levels & Divisions: Offered in the 4th- 8th Grades

- Divisions – Grade Levels will be combined as needed (i.e. 4th/5th, 5th/6th, 7th/8th).
- Teams and players are allowed to “PLAY UP” in grades/divisions if they have the necessary skill level.

➔ Registration & Concussion Forms – All participants must complete and turn in the below registration/waiver form, as well as a separate concussion form with parental consent prior to participating in any practice or game.

Cut ✂ Here

2025 Boys S.W.I.S.H. Registration Form – INDIVIDUAL (Skagit County Only)

In consideration of your accepting my entry, I hereby for myself, my child or children when applicable, my heirs executors and administrators waive and release any and all rights and claims for damages I or my child(ren) may have against Skagit County through Skagit County Parks & Recreation and its representatives, successors or assignees for any and all injuries suffered by myself or my child(ren) while going to, participating in, or returning from this activity. I have read this statement and my signature below verifies mine and my child's acceptance of these conditions.

Participants Name: _____ Player Birth Date: ____/____/____

Parent Name: _____ Parent Signature: _____

Address: _____ City, Zip: _____

E-Mail: _____ Phone(s): _____

Grade (circle one): 4th 5th 6th 7th 8th School AND Previous Team, if avail.: _____

Adults, please check if interested in: Coaching _____ Assisting _____ Refereeing _____

Send Registration & Fee to: Skagit County Parks & Recreation
1730 Continental Place 360-416-1350
Mount Vernon, WA 98273 parksrec@co.skagit.wa.us

All Major Credit Cards Accepted:
American Express, Discover,
MasterCard & Visa



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