New Castle County Sports and Athletics

Department of Community Services
77 Reads Way • New Castle, DE 19720
(302) 395-5890 (office) *(302) 395-5892 (fax)*

www.nccdesports.com

Thomas P. Gordon
County Executive

2014 MEN'S SUMMER BASKETBALL LEAGUES

***** NEW PROGRAM – T/TH 3 on 3 LEAGUES**

Registration is open and teams are accepted on a first-come, first served basis. The registration deadline, if openings exist, is **May 27, 2014**. Credit card customers can register online at **www.nccdesports.com.** Penalties apply for early withdrawal from league and forfeits during season. For additional information please contact the Sports Office which is open Mon. – Fri. 8 am-4 pm.

	5 on 5	**3 on 3**
Teams	12	24
Games	10, plus playoffs	20, plus playoffs
Days / Times	Mondays & Wednesdays 6:00 / 7:10 / 8:20	Tuesdays & Thursdays 6:00 / 7:10 / 8:20
Location:	Greenbank Park located off Kirkwood Hwy. near Prices Corner	
Start Date	Monday, June 2	Tuesday, June 3
Rules	NFHS with exceptions	
Format	60 point games, 60 min. time limit (single games each night)	30 point games, 30 min. time limit (doubleheaders each night)
Roster (max)	15	8
Uniform requirement	Like-colored jerseys with numbers	
Equipment	Home team must provide game ball	
NCC Fee	$350	$230
Officials' Fee	$330	n/a (call your own fouls)
	Paid by each team to officials before game. Do not send this fee to NCC. Officials' fees for playoff games are not included in this estimate	
Managers' Meeting	There are no managers' meetings scheduled for this season	

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Mail payment (checks made payable to "New Castle County"), with entry form, to
NCC Sports and Athletics, 77 Reads Way, New Castle, DE 19720

DO NOT INCLUDE REFEREE FEE! Faxed registrations without payment information will not be accepted.

Manager		Team Name		Previous Team Name	
Address		City		State	Zip Code
Home Phone		Daytime Phone (circle one): Work Cell		E-Mail Address	
Circle League Preference:		5v5 League (Mon. and Wed.)		3v3 League (Tue. and Thu.)	
Team Rating (Circle One)	1 (Novice)	2	3 (Intermediate)	4	5 (Competitive)

For Office Use	Date	Amount	Check Name	Check No. / Bank No.

For Credit Card Payment Only

☐ *Check this box to pay with a credit card. You will be contacted by the Sports Office for your payment information.*