



# BASKETBALL

## GHRA SPORTS LEAGUE

**APR 22 - JUN 22**

**SUN 12 PM - 10 PM**  
**MON & TUE 6 PM - 10 PM**  
**THU 6 PM - 10 PM**

**AGANA HEIGHTS GYM**  
**YIGO GYM**  
**AGANA HEIGHTS GYM**

**REGISTER NOW**

**CONTACT: JOANNE REYES**  
**EMAIL: [SPORTS@GHRA.ORG](mailto:SPORTS@GHRA.ORG)**  
**PHONE: 671-649-1447**



# GHRA BASKETBALL LEAGUE

## REGISTRATION FORM



Hafa Adai!

We are excited to announce the return of the GHRA Basketball League! GHRA has secured the Agana Heights gymnasium for the season. Games are scheduled to run from April 22, 2025 through June 22, 2025. Sign up today if you're interested in registering one or more of the teams in the following divisions:

- Competitive -one (1) to two (2) competitive pool with top prizes within the division
- Recreational - four (4) semi-competitive pools with top prizes within the division
- Intramural - one (1) to two (2) least competitive pool with top prizes within the division

Once you have registered, please know GHRA will host a Coaches meeting at 3 p.m. on Thursday, April 3, 2025 at the Hyatt Regency Guam. Your team roster and payment(s) are due on the same day as the Coaches meeting. Team coaches/managers will discuss any requests for combination of teams and review the by-laws for the league with GHRA and the Guam Basketball Confederation.

- Start Date / End Date: April 22, 2025 - June 22, 2025
- Location / Days / Times: Agana Heights Gym from 12 p.m. to 10 p.m. on Sundays  
Yigo Gym from 6 p.m. to 10 p.m. on Mondays & Tuesdays  
Agana Heights from 6 p.m. to 10 p.m. on Thursdays
- Entry Fee for Members: \$1,150 per team (GHRA members - hotels, restaurants & allied)
- Entry Fee for Affiliates: \$1,380 per team (GHRA affiliates - government, non-profit organizations)
- Deadline for payment: Thursday, April 10, 2025 (Late Fee of: \$50.00)

Should you have any further questions, please do not hesitate to contact Joanne at 671-649-1447 or via email at [sports@ghra.org](mailto:sports@ghra.org). REGISTRATION FORMS ARE DUE by Thursday, April 3, 2025.

NAME:

Company:

Telephone Number:  
//

Email Address:

COMPETITIVE

RECREATIONAL

INTRAMURAL

# OF TEAMS

\$1150 / TEAM MEMBER (Hotel, Restaurant & Allied)

# OF TEAMS x \$1150 =

\$1380/ TEAM AFFILIATE MEMBER

# OF TEAMS x \$1380 =

Submit no later than Thursday, April 3, 2025 to JOANNE REYES at [SPORTS@GHRA.ORG](mailto:SPORTS@GHRA.ORG).  
If you have any questions, please contact GHRA at 671-649-1447.



**GHRA BASKETBALL LEAGUE**  
**ROSTER/RELEASE OF LIABILITY/**  
**EMPLOYEE VERIFICATION**



**TEAM NAME:** \_\_\_\_\_

**CAPT./MGR. NAME and COMPANY NAME:** \_\_\_\_\_

I, THE UNDERSIGNED, HERBY ACKNOWLEDGE THAT IN THE EVENT OF AN ACCIDENT OR INJURY, THE 20259 GHRA BASKETBALL LEAGUE, HOST VENUE, AND OUR COMPANY WILL NOT BE HELD LIABLE FOR ANY DAMAGES OR PERSONAL INJURIES INCURRED DURING ANY BASKETBALL ACTIVITIES SPONSORED OR HELD BY, AND/OR ASSOCIATED WITH THE GUAM HOTEL & RESTAURANT BASKETBALL LEAGUE.

AS A PARTICIPATING TEAM IN THE 2025 GHRA BASKETBALL LEAGUE, IT IS UNDERSTOOD THAT EACH MEMBER OF YOUR TEAM IS PERSONALLY RESPONSIBLE FOR THE TEAM, COACHES, MANAGERS, FAMILY MEMBERS AND ITS MEMBERS, AND THE HOST VENUE. IF ANY LIABILITY RESULTS AS PART OF YOUR USE OF THE HOST VENUE THROUGH THE NEGLIGENCE OR CARELESSNESS OF SAID PERSONS, THE TEAM AND ITS MEMBERS WILL BE RESPONSIBLE FOR SUCH LIABILITY AND PAYMENT WILL BE MADE TO COMPENSATE FOR SUCH LIABILITY. THE GHRA PERSONNEL AND HOST VENUE ARE NOT RESPONSIBLE FOR ANY INJURIES OR ANY LIABILITIES THAT MAY ARISE AS A RESULT OF YOUR PARTICIPATION IN THE 2024 GHRA BASKETBALL LEAGUE. I THEREFORE AGREE TO THE ABOVE STATEMENT AND WAIVE MY RIGHT TO HOLD G.H.R.A., HOST VENUE AND OUR COMPANY ACCOUNTABLE OR LIABLE FOR ANY PROPERTY DAMAGES, LOSS, OR PERSONAL INJURY IN THE EVENT THAT SUCH AN ACCIDENT WOULD OCCUR.

FULL NAME (PRINT)	JOB TITLE	DEPT / LOCATION	SIGNATURE

To be completed by the Human Resources Office or Administration:

This is to certify that I have verified that the list provided on this roster is true and correct. All individuals on this roster are employees of our company.

Certified by (please print name): \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

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