

T O: ALL BARANGAY BEL-AIR EMPLOYEES

R E: BARANGAY BEL-AIR 2025 INTERCOLOR BASKETBALL EMPLOYEES' DIVISION

FROM: BARANGAY BEL-AIR SANGGUNIANG KABATAAN

Tournament Structure

- 1. Employees of Barangay Bel-Air, BAVA (Tanod, BAVA Staff, Security, and maintenance) and Household Employees (Drivers, Houseboys, Gardeners, etc.)
- 2. Employees will be divided into two divisions.
- 3. All players are required to attend on their game schedule. Absent players are required to submit a written explanation on why they could attend their scheduled game. Upon 2nd absence, players will not be allowed to join the following/next year's basketball tournament.

Team Formation

- 1. All interested employees must fill up the form below and sign the waiver.
- 2. All employees for each division will go into a draft pool. They will be assigned to teams via modified drafting whose primary goal is to create as much parity among the teams as possible.
- 3. To ensure that all players will have a chance to play, a minimum amount of playing time (5 or 10 minutes per game) will be required.

Registration Procedures

- 1. All interested employees should submit the form below to the Barangay Bel-Air office by **Wednesday**, **September 10, 2025**
- 2. There will be a meeting to be announced for all employees at the Barangay Office to determine the formation of teams.
- 3. PLEASE BE ADVISED THAT EACH SECTOR HAS LIMITED SLOTS. THE BARANGAY WILL PRIORITIZE REGISTRATION FORMS BASED ON DATE OF SUBMISSION.
- 4. For Household Employees (drivers, houseboys, gardeners, etc) kindly attached a letter from your employer that they were allowing you to join the said tournament with a photocopy of your Bel-Air ID.
- 5. IMPORTANT: AS PER COA AND GOVERNMENT REGULATIONS, ALL BEL-AIR EMPLOYEES CAN JOIN ONLY ONE TEAM AND ONE DIVISION ONLY IN THIS YEAR'S TOURNAMENT.

Thank you,

ISAAC PHILIP "ZAKI" AGUILAR SK Secretary

Noted by:

CRISTINA ALEXANDRA G. CAMUS

SK Chairperson

CYNTHIA D. CERVANTES

Barangay Captain



NAME OF PLAYER		1 x 1 I.D. Picture
JOB TITLE	DATE OF BIRTH	_
CONTACT NUMBER	NAME OF EMPLOYER	
ADDRESS OF EMPLOYER		
	GENERAL WAIVER	
Tournament voluntarily and on my ow this league. I shall not hold any representatives, employees, staff and closs, impairment or any untoward or participation in this tournament. I her will also not authorize any other part involved with the tournament for any impairment I may have incurred during I have also read and have been informated violations thereof. I fully understand not to hold anybody, especially Barar staff and contracted parties, liable civil my team in connection with the rules of any of the aforementioned parties civil	ppears above, hereby certify that I have joined the Bel-Air In free will as I am physically healthy, in good physical condition free will as I am physically healthy, in good physical condition from the organizers of this body, especially Barangay Bel-Air, the organizers of this contracted parties, liable civilly, criminally nor administrative or unfortunate incident befall or happen to me on the occass reby agree to relive and exempt all parties from any liability ty to file on my behalf any claim seeking financial reimburse expenses they may have incurred, medical or non-medical, during the tournament. Interpretation of all the rules and regulations of the tournament, including them and hereby fully and completely agree to be bound by any and Bel-Air, the organizers of this tournament, their repressed in the property of the tournament. I will also not authorize any regulations of the tournament. I will also not authorize any team in connection with the rules and regulations of the tournament in connection with the rules and regulations of the tournament in connection with the rules and regulations of the tournament in connection with the rules and regulations of the tournament in connection with the rules and regulations of the tournament in connection with the rules and regulations of the tournament.	tion and fit to play in a tournament, their ly, should any injury ion of my voluntary and responsibility. I ment from any party to any injury, loss and them. I hereby agree entatives, employees anctions on myself of y other party to hold or my team for any
SIGNATURE:	DATE OF SIGNING:	
Documents submitted:		
Photocopy of Bel-Air ID		
Letter from Employer		

Registration Form