



**Robbinsdale Recreation Services - 763-531-1278**



# YOUTH BASKETBALL

## JUNIOR BASKETBALL

Introduction to the sport of basketball. Players will learn the basic skills in passing and shooting in a fun, supportive environment. Scrimmages will be played the last week. Participants will receive a t-shirt. Register by January 22.

- WHO:** 5-7 year olds
- WHERE:** Robbinsdale Community Center Gym
- WHEN:** Sundays, January 28-March 11 (Skip 2/25/18)
- Opt 1:** 12:30-1:30 pm
- Opt 2:** 1:45-2:45 pm
- FEE:** \$40 per option



## 2<sup>ND</sup>-7<sup>TH</sup> GRADE BASKETBALL

*Joint program with other Cities*

Recreational league, focus is on teaching basketball skills, good sportsmanship and playing as a team. Teams may be combined with other cities in order to have enough players per team. Practice times will be determined by gym and coach availability. Parents are strongly encouraged to volunteer as a coach. Note on registration form if interested in volunteering as a coach or assistant coach. Register by December 15 or until team is filled.

### Divisions offered are:

- Boys:** 2<sup>nd</sup> Grade, 3<sup>rd</sup> Grade, 4-5<sup>th</sup> Grades & 6-7<sup>th</sup> Grades
- Girls:** 2<sup>nd</sup>-3<sup>rd</sup> Grades, 4-6<sup>th</sup> Grades
- WHERE:** Community Gym Locations
- Games:** Saturdays, January 20-March 10
- Practices:** Weekday evenings, varies depending on the coach
- FEE:** \$60



## BASKETBALL REGISTRATION & WAIVER FORM

Please print clearly. Make checks payable to City Robbinsdale and mail to City of Robbinsdale, 4100 Lakeview Ave N, Robbinsdale MN 55422

**Option/Division:** \_\_\_\_\_ **Interested in coaching/assisting** \_\_\_\_\_

Youth's Name \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_ Gender: \_\_\_\_\_

Contact Name: \_\_\_\_\_ contact's email: \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

Payment:  CASH  CHECK  DISCOVER  VISA  MASTERCARD

Total AMT: \$ \_\_\_\_\_ Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Card Holders Signature: \_\_\_\_\_ 3-4 Digit Code: \_\_\_\_\_

**Please list any special needs or equipment participant may need:** \_\_\_\_\_

**Liability Waiver:** The undersigned acknowledges that recreational and sports programs involve inherent risks of personal injury. It is agreed that participation in the program is voluntary and at the participant's sole risk. The City shall not be liable for any claims, demands, injuries or damages whatsoever to the participant or participant's property arising out of the participant's participation in the program. On behalf of the participant, the undersigned releases and discharges the City, its employees or agents from all such claims, demands, injuries or damages, except those directly caused by the gross negligence of the City, its employees or agents.

**Signature** Participant or guardian, if participant is under 18 : \_\_\_\_\_ **Date:** \_\_\_\_\_