WINTER 2017
YOUTH BITTY BASKETBALL

EARLY REGISTRATION:
November 1 - 30, 2016

PARTICIPANTS:
Age 3 --- 9:00AM
Age 4 --- 10:00AM
Age 5 and 6 year old kindergarteners --- 11:00AM

DATES OF ACTIVITY:
Saturdays --- January 7, 14, 21, 28, 2017

LOCATION:
Riverfront Community Center Gymnasium

FEES:
- **Early registration fee: $35.00**
- **Scholarships pay a maximum of 30.00 per child**
- **Late Fee: ANY Registration from December 1 – 15, 2016 --- $55.00**
- **Registration after December 15, 2016 --- $80.00**

SKIILL DEVELOPMENT PROGRAM

SESSIONS CONDUCTED BY
LEAVENWORTH HIGH SCHOOL
GIRLS BASKETBALL COACHING STAFF AND ATHLETES
STATE CHAMPIONS 2014 AND 2015
STATE RUNNER-UPS 2016

FOR MORE INFORMATION

Leavenworth Parks and Recreation
913-758-6648
tmedill@firstcity.org

LEAVENWORTH PARKS AND RECREATION DEPARTMENT
PROGRAM REGISTRATION FORM

OFFICE USE ONLY

AMT PD _____

DATE _____

RCPT# _____

CK OR CS _____

INITIALS _____

YOUTH BASKETBALL

SPORTS PROGRAM

Male Female
(Circle One)

_____
FIRST NAME LAST NAME

_____
SCHOOL NAME

_____
ADDRESS

_____/_____/_____
BIRTHDATE

_____
CITY / STATE / ZIP CODE

_____ _____
GRADE AGE

(_____)_____
TELEPHONE NUMBER

(_____)_____
ALTERNATE PHONE

_____
MOTHER'S NAME

_____
FATHER'S NAME

SHIRT SIZE (circle one): YS YM YL AS AM AL AXL

I/we the parent(s) of the above named person, who is participating in the above named Recreation Activity, hereby give my/our approval to his/her participation in any and all of the activities of the class or activity. I/we assume all risks incidental to the conduct of the activities or class. I/we do further release, absolve, indemnify, and hold harmless the Leavenworth Parks and Recreation Department, the sponsors and supervisors, any or all of them. In case of injury to my/our child or myself, I/we hereby waive all claims against the organizers, sponsors, or any of the supervisors appointed to them. I/we likewise release from responsibility any person transporting my/our child or myself; to or from the activities. I/we would furnish a birth certificate if so requested by the Parks and Recreation Department.

The City of Leavenworth Parks and Recreation Department is committed to providing a positive and productive participation, and learning environment for all of its participants. The Department promotes sportsmanship throughout its entire programming amongst all of its participants: coaches, players, officials, spectators, etc. This includes ALL interaction between all of the participants in departmental programming and facilities. Hazing, harassment, intimidation, menacing, or bullying by participants, and/or third parties, albeit actions, spoken or written, is strictly prohibited and shall not be tolerated by the Parks and Recreation Department. Participants whose behavior is found to be in violation of this policy will be subject to discipline, up to and including removal from the program. Any individual removed from a program for inappropriate behavior shall not receive a refund of any fees paid.

_____
PARENT SIGNATURE

_____
PARTICIPANT SIGNATURE

EMAIL ADDRESS: _____ (PRINT CLEARLY)

NOTE: ALL REGISTRATION FORMS MUST BE RETURNED TO THE RIVERFRONT COMMUNITY CENTER 123 S. ESPLANADE.