

West Union Parks and Recreation

Boys Basketball – Grades 5~6

5th Grade Practices Mon, Wed, Thurs from 5-6 in Fayette Gym

6th Grade Practices Mon, Wed, Thurs., from 6~7 in Fayette Gym

Games are January and February on Saturdays

Deadline:	Entries must be rece	eived by Thursday	, October 27, 2016.	Complete schedules wil	1 be sent once
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registration closes and teams are formed.

Entry Fee: \$25 if no new uniform is needed and West Union Resident; \$30 extra if a uniform is needed.

No Refunds. Make checks payable to West Union Parks and Recreation. **Please duplicate this form as necessary. NOTE:** If you have more than one child participating in the same activity, there will be a \$5.00 discount for each additional child. Example: If you have three children participating the total cost would be \$65.00---\$25.00 + \$20.00 + \$20.00 = \$65.00. This is a savings of \$10 per activity.

If you have questions, please contact the office at 422-3685.

Send to: Mail entries to: West Union Parks and Recreation, PO Box 151, West Union IA 52175. They

can also be returned to the school.

Questions: Email Kathy Guyer at <u>wuparkandrec@gmail.com</u> or call 563-380-8496. Additional practice

schedules will be provided at first practice.

This activity is NOT school sponsored. All inquiries should be directed to Park & Rec. Note the contact information above. DO NOT CALL THE SCHOOL asking if there is a cancellation. Park & Rec will notify the school of any change in plans. Changes will be announced to the students at school.

Each child must have a parental permission note to give to the school if they are to go to the Park and Rec activity following school dismissal. Without a parental permission note, the child will follow his/her normal after school procedure. Each child is required to have a parental note as to what the child should do if the activity is cancelled.

Name:	Grade: A	Activity: 5~6 Boys B	Basketball
Address:	Phone Number:		
	Email:	used for cancel	llations/announcements only
Emergency Contact: Yes, I am willing to help c	Phone Number:	Shirt Size:	Shirt # (if he has shirt)
No, I am not able to coach	at this time but keep me in mind for fu . s assume full responsibility for any risl		oation in said activity or
listed above, its coaches, the City coaches and volunteers, for any arregistered activity. I also understa	listed above, waive and release any anof West Union and its Parks and Rec. Dand all injuries that may be suffered by and it is my responsibility to transport toning is provided by the school or the	Department/Board and its empl the entrant listed above in con- my child(ren) from the school	loyees, other sponsors, nection with the above to the recreation center.
Parent/Guardian Name:	Signature:	<u> </u>	