



# Fall 2009 Youth Hoops



## SMALL BALL KINDERGARTEN-3<sup>RD</sup> GRADE

This is the ultimate learning experience in a non-competitive environment. This program is the best introduction to BASKETBALL: teaching the basics of shooting, ball handling, defense, and passing. Your young athlete will participate in a basketball camp atmosphere during the first 2 weeks of the program. The remaining weeks of the season will consist of a 30-minute practice, followed by a 30-minute game.

## CO-ED 4<sup>TH</sup>-5<sup>TH</sup> GRADE RECREATION LEAGUE

Boys and Girls have the opportunity to partake in an exciting basketball experience. This program is conducted under a philosophy of participation, skill development, good sportsmanship, and fun. The focus is placed on recreational competition. Teams will be determined after 1<sup>st</sup> Day skill development experience. This will give participants a chance to learn & prepare for the upcoming season. Participants that will not be able to attend will be added to a team roster after the 1<sup>st</sup> Day Camp. An additional practice will be held during a week night.

*\*Non-Tempe Residents Are ALWAYS Welcome\**

Course Code	League	Grades	Day	Times	Dates	Location	Cost
18653	Boys and Girls	K-1st	Saturdays	9:00am-10:00am	Sept. 19-Oct.31	Kiwanis Recreation Center	\$78.65
18654	Boys	2nd-3rd	Saturdays	10:00am-11:00am	Sept. 19-Oct.31	Kiwanis Recreation Center	\$78.65
18655	Girls	2nd-3rd	Saturdays	11:00am-12:00pm	Sept. 19-Oct.31	Kiwanis Recreation Center	\$78.65
18656	Boys and Girls	4th-5th	Saturdays	12:30pm/1:30pm	Sept. 19-Oct.31	Kiwanis Recreation Center	\$78.65

Name \_\_\_\_\_ Parent's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Day Phone \_\_\_\_\_ Night / MOBILE \_\_\_\_\_

BIRTH DATE \_\_\_\_\_ Age \_\_\_\_\_ SCHOOL \_\_\_\_\_ GRADE \_\_\_\_\_

ACTIVITY CODE: \_\_\_\_\_ E-Mail \_\_\_\_\_

(Required- see listings above)

PLEASE CHECK ALL THAT APPLY

Parents, check if you are interested in coaching.

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

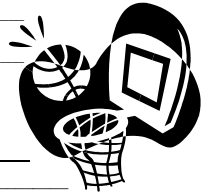
Parents, check if there is a specific individual you want to coach your child

Coaches Name: \_\_\_\_\_

Parents, check if there are friends your child would like to play with

Friend's Name: \_\_\_\_\_

Friend's Name: \_\_\_\_\_



Looking to get involved? We have lots of volunteer positions. If you have any questions about game times, or which skill level to have your child in, please do not hesitate to call.

Keyon Cornejo at 480-350-5222 or  
keyon\_cornejo@tempe.gov

### Waiver of Liability

*\*Photos may be taken during games for use and ownership of City of Tempe*

- With knowledge and appreciation of the risk of injury, I wish to participate in this Activity. I agree to assume the risk of personal injury while participating.
- I understand the City of Tempe does not carry accident, sickness, or medical insurance for participants.
- I understand that all reasonable efforts will be extended to insure my health and safety.
- If the Activity includes any physical exertion, I agree to perform the exercise at my own ability level.
- I fully understand the nature of this Activity, and I waive and release and hold harmless the City of Tempe and any of its agents, employees, officers, council members, and sponsors for any and all rights and claims for damages or costs I may have against the City of Tempe, its agents, employees, officers, council members, and sponsors for personal injury, death, or property damage suffered by me, or that I may cause to others, as a result of my participation in this Activity.
- I agree to look to my private physician for medical advice and care and to notify my teacher or instructor of any physical limitations I might have or modifications I might need to the Activity. I will require the following accommodation to participate: \_\_\_\_\_
- I have read and clearly understand the above statements. I realize this is a contract between myself and the City of Tempe and is a release of Liability. I sign it of my own free will.

REQUIRED: Parent or Legal Guardian Signature

AND Printed Name

Date

### Payment

**\*\*\*FEE ASSISTANCE AVAILABLE\*\*\***

Fee: \$ \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Exp. Date: \_\_\_\_\_

Enclosed Check # \_\_\_\_\_ OR Signature Authorizing Charge to above number

Tempe Parks and Recreation

Info: 480-350-5200 / TDD: 480-350-5050

www.tempe.gov/sports



Want to play FOOTBALL?  
(OVER)

