

Willington Parks and Recreation

2019-2020 Lakes Region Youth Basketball

Ashford, Bolton, Coventry, Hebron, Mansfield and Willington

Recreational Basketball features basic skills, dribbling, passing, shooting, good sportsmanship, and fun! All home games and practices are at the Hall School Gym.

*****Registration deadline is October 1st*****

About the Program

Instructional League: Grades 1 and 2 (**Registrations accepted until November 1st**)

This 10-week program begins on Saturday, December 7th and continues through Saturday, February 8th -- 8:00 a.m. - 9:00 a.m.

Grades 3-8: Games are played on Saturdays beginning in December with the last season game in February; Jamboree/tournament play will be held after the last season game.

Please Note: Players cannot play both travel/competitive division and recreation division in the same season. School sponsored teams do not apply to this rule.

COACHES ARE CURRENTLY NEEDED FOR ALL LEVELS FOR THE BOYS and GIRLS

Please email the department if you are interested in coaching. Evaluations/team selections will be held in early November. More details will be sent out in an email to all those registered and through the digital backpack.

Practices begin in early November. Coaches will email you the exact day and time.

Fees:

Instructional (Grades 1-2) \$60.00 per player (10 weeks)

Grades 3-4 \$75.00 per player* (shooter shirt given)

Grades 5-8 \$85.00 per player* (Reversible jersey provided)

Grades 9-12: A separate registration form will come out in November.

***\$250.00 family maximum**

Reversible tanks must be returned to your coach at the last game or a \$20 fee will be assessed.

Program Philosophy

It is expected that players will do their best at all times and avoid negative remarks (or gestures) to any player, and act in a sportsmanlike manner always, win or lose. All participants shall treat one another with dignity and respect. Be generous when you lose; be gracious when you win.

PARENTS

Volunteer parents are needed to help with keeping the book, cleaning bleachers, sweeping floor and picking up bathrooms. Please remember no food or drink besides water is allowed in the gym. Please keep siblings in the bleachers with you and not wandering the gym or entry way. Together we can have a successful program!

Please make checks payable to: WPRD and mail to Parks & Recreation Department, 40 Old Farms Road, or drop off at the Parks and Recreation Office during normal business hours or drop in the tax collector's box outside of the building.

It is the Willington Parks and Recreation policy that all children should have the opportunity to participate in sport programs. Registration fees may be reduced due to financial need. If you are experiencing a financial hardship this season, please contact the Parks and Recreation Director, Maureen Parsell at mparsell@willingtonct.org or call (860) 487-3108.

Please Print Clearly
Use a Separate Form for Each Child

Child's Information

Child's Name: _____

Sex (Circle One) Male Female

Grade: _____

Shirt Size: (please circle) YM YL

Date of Birth: _____

AS AM AL AXL

Address: _____

Home Phone: _____

Allergies, Meds, Other Info: _____

Primary Household Contact (Parent/Guardian) **Secondary Household Contact (Parent/Guardian)**

Name: _____

Name: _____

Address: _____

Address: _____

Town: _____ Zip: _____

Town: _____ Zip: _____

Phone: (H) _____ (W) _____

Phone: (H) _____ (W) _____

(Cell) _____

(Cell) _____

Email Address: _____

Email Address: _____

Communications will be through email.

LOCAL Emergency Contact (Other than parent/guardian, i.e. grandparent, neighbor, etc.)

Name: _____

Phone: _____

I, the undersigned, by registering myself or my child in the town's programs/trips understand the nature and risks associated with the participation in this activity. I hereby grant my child permission to participate. I am aware that participation is at one's own risk. I acknowledge that the activity, equipment and facilities may pose a risk of personal injury. I am also aware that each participant is responsible for his or her own safety. I hereby waive and release myself, my heirs, executors or administrators of any and all claims and damage we ever had or now have, against the Town of Willington, its successors and assigns, employees, agents and representative for any and all kinds of injury, including but not limited to personal injury and/or property damage suffered by my child, myself, family members or friends while participating in this program. Consent for Medical Treatment of Minors, as the parent or legal guardian of the above named player, I hereby give consent for emergency medical care prescribed by a fully licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or wellbeing of my dependent. I certify that the information contained on this form is accurate and complete.

Player, Parent or Guest Code of Conduct:

Any person who is using alcohol or illicit drugs and/or appears to be intoxicated or under the influence, or who is flagrantly rude, attempts to intimidate, verbally abuse or uses vulgarity or profane language/gestures with an official, coach, or player will be asked to leave the program or game immediately. Any person who commits the above offenses a second time will be banned from any and all programs for a period of one year from the date of the second offense. Any person who physically assaults another player will be immediately removed from program and will be banned for one year from the time of the offense.

Parent/Guardian Name (Please Print): _____

Parent/Guardian Signature: _____

Office Use Only: Check _____ Cash (in office only) _____ Amount Paid _____ Date Paid _____