

Portland Parks & Recreation 1st & 2nd Grade Basketball Leagues

Winter



2012

This program will be strictly recreational with emphasis on skill development, teamwork, and having fun!

Location	Fee	Registration Deadline
Oakwood & Westwood gyms	\$30	November 10, 2011

Division 1: 1st & 2nd Grade **Girls** **Division 2:** 1st & 2nd Grade **Boys**
~Boys and Girls divisions will be combined if necessary~

*****Parent volunteer coaches are the key to the success of this program*****

Schedule of Events
Saturdays, December 3, 10, 17, 2011:
Practice at Oakwood & Westwood Times TBD
Saturdays, January 7 - February 11, 2012:
Games at Oakwood & Westwood - 6 games - Times TBD
Weekday practice will also be held at Oakwood & Westwood throughout the season

For more information please contact Neil Brown at the Recreation office at:
517.647.3207 or recreationprogrammer@portland-michigan.org

Please return registration form below with payment to Portland City Hall - 259 Kent St.

** Make checks payable to "City of Portland" **



Winter 2012 Registration Form 1st & 2nd Grade Youth Basketball Leagues



Name: _____ Male or Female Age: _____ Grade: _____
 Address: _____ City & Zip: _____
 Phone: _____ Email (rec. use only) _____ Shirt Size: _____ Youth (circle) S M L XL

I want to coach: Yes or No If yes, Name / Phone: _____

I live in the city of Portland: Yes or No If no, I live in the Township of _____

My child attends (circle): Portland Public Schools or St. Patrick's or Other

Divisions (Circle One):

Division 1: 1st & 2nd Grade **Girls** **Division 2:** 1st & 2nd Grade **Boys**
***Boys and Girls divisions will be combined if necessary**

I hereby, for myself, my heirs, executors and administrators waive and release any and all rights and claims for damages I may have against the City of Portland, their respective agents or any facility used for this recreational program, for any and all injuries which may be suffered by my dependents in connection with my participation in said program. I further represent that I carry medical-hospital insurance and I understand the City does not provide such insurance coverage for me.

Signature of parent or legal guardian: _____

Please print your name: _____

Amount Enclosed

\$30