

Portland Parks and Recreation
265 Main Street; PO Box 71
Portland, CT 06480
(860)- 342-6757 (860)-342-6763 FAX

Basketball Grades 3 & 4



RECREATION BASKETBALL LEAGUE

Portland Parks and Recreation Youth Basketball League is designed to give Portland children the opportunity to experience and enjoy the game of basketball. There will be one practice during the week and one game or practice on Saturdays. Each child will receive a team shirt. Leagues are NOT co-ed. Must be a Portland Resident

Fee: \$62 before December 1st or \$72 on or after December 1st
Player Evaluation (To assist with Team Selection)

Site: Gildersleeve School

Girls Monday, November 26

Boys, Monday, November 26

Grades 3 & 4 – 5:00 - 6:00 p.m.

Grades 3 & 4 - 6:15 – 7:15 p.m.

Beginner Basketball is designed for boys and girls in grades 3 and 4. Practices and games are used as opportunities to learn basic rules of basketball and develop skills in a non competitive encouraging environment. Coaches and officials will use teachable moments to help players learn rules and develop good sportsmanship practices while gaining skills and making new friends. Scores are not kept in Beginner games. Practice will begin the week of December 3rd and games will begin the weekend of January 5th.

You may register by mail, drop off at Parks and Recreation or

*****ON-LINE REGISTRATION PORTLAND.RECDESK.COM*****

COACHES MEETING

There will be a coaches meeting for all recreation basketball coaches on
GRADE 3 AND 4 - Thursday, November 29th – 6:00 pm at the Parks and Recreation Office

PORTLAND PARKS AND RECREATION

Po Box 71, 265 Main Street, Portland, CT 06480 Phone: 342-6757 Fax: 342-6763
www.portlandct.org

Participant's Name: Phone Number:

Street Address Apt. # Town: Zip Code:

Male: Female: Date of Birth School Grade:

Shirt Size (Kids) S M L (Adults) S M L XL

Mother's Name Father's Name

Home Number E-mail Address:

Mom's Work Phone: Dad's Work Phone:

Mom's Cell Phone: Dad's Cell Phone:

If a parent is not available:

Emergency Contact: Relationship:

Home Phone # Work Phone: Cell Phone #

Child's Physician: Phone #:

* If there are any medical concerns or allergies that we should be aware of, please list below:

In case of an emergency, may we transport via ambulance? Please circle: Yes No

Please list anyone who does not have permission to pick up your child (If this is a biological parent, a copy of the court order must accompany this form).

I give the Portland Parks and Recreation Dept. permission to use any photographs taken during the program to be used in any advertising, i.e. web site, program literature: Yes No

Table with 3 columns: Program(s), Date & Time, Fee. Rows 1 and 2.

TOTAL:

I hereby agree to hold harmless the Town of Portland and its agents for any accidental injury caused by participation in any Town of Portland sponsored activities. In signing this form, it is understood that Portland Parks and Recreation Department and the Town of Portland DO NOT assume responsibility for accidents and the participant(s) agree(s) to abide by all rules and regulations set by the Portland Parks and Recreation Department.

Parent or Guardian: (Print Name) (Signature) (Date)