



GRADES 3 & 4
Basketball Skills Camp and Recreation League Games

The Alton Parks and Recreation philosophy is to teach fundamental skills, creating a strong foundation for players, to encourage cooperation during play, and to promote the love of the game with everyone having fun. We strive for full inclusion and to have players fundamentally ready for the competitive basketball league.

*Sponsored by
Alton Parks and Recreation*



**January 7 to February 18, 2017
at Prospect Mountain High School**

**Includes
Camp Jersey!**

All players:
Please bring youth size basketball

SATURDAY WORKSHOP SCHEDULE			
SKILLS	Boys & Girls	1/7-1/21	9:30-11:30 am
	Boys & Girls	1/28-2/18	9:30-10:30 am
GAMES*	Boys	1/28 & 2/11	10:30-11:30 am
	Girls	2/4 & 2/18	10:30-11:30 am

*Games will be at PMHS vs. Rec Basketball League team

Please note: Team structure will be based on number of players registered. Co-ed teams may be formed if needed to run the program.

Develop and improve your basketball skills



- Intro to offense
- Defense
- Scrimmage
- Half-court play
- Full-court play
- Man-to-man defense
- Limited offense
- Fundamental skills
- FUN!

Join the Pack!

★ DON'T MISS OUT! ★

Complete and return the registration form on the back of this flyer with your payment of \$35 by November 18. (\$60 after November 18 & placed on wait list)

One registration form per player, please.

Info for eligible fourth graders:
Players in grade 4 with exceptional skills and a willingness to learn are welcome to participate in a skills assessment if they wish to tryout for the 5 & 6 grade team. Eligible players with a positive attitude will need to demonstrate their proficiency in following directions, ball handling, defense and offense, positioning, shooting and passing. Contact Alton Parks and Recreation for further information.



GRADES 3 & 4 WOLF PACK SKILLS CAMP & GRADES 5 & 6 BASKETBALL PROGRAM



REGISTRATION AND PAYMENT INFORMATION

\$35 registration fee per player on or before November 18 • \$60 after November 18 and placed on wait list

Please complete ALL information legibly. Full payment is due at the time of registration. Checks should be made payable to "Town of Alton" and mailed to PO Box 659, Alton, NH 03809 or dropped off at the Alton Parks and Recreation office located at 328 Main Street (AVAS Public Park) on Route 11 across from Levey Park. Please do not send cash.

PLAYER INFORMATION

Last Name: _____ First Name: _____ Gender: M F Grade: _____

Player address: _____ Circle shirt size: YM YL AS AM AL XL

PARENT/GUARDIAN INFORMATION

Please provide both parent/guardian names, addresses, phone numbers and email addresses.

Parent/Guardian #1

Name: _____

Mailing _____

Address: _____

Best Contact Phone #: _____

Email: _____

(Important for communicating basketball information.)

Parent/Guardian #2

Name: _____

Mailing _____

Address: _____

Best Contact Phone #: _____

Email: _____

(Important for communicating basketball information.)

EMERGENCY NOTIFICATION AND MEDICAL INFORMATION

In case of emergency, please notify Parent/Guardian #1 listed above or Parent/Guardian #2 listed above. Alternate contact is:

Name: _____ Relationship: _____ Contact Phone: _____

Please indicate hospital preference: _____ Check here for no hospital preference

Doctor's name: _____ Doctor's office phone: _____

Please list any allergies, limitations or accommodations needed: _____

Please list medications your child is taking: _____

WAIVER AND RELEASE OF LIABILITY

Participation in the Basketball program may involve risk of injury, including, but not limited to, sprains, strains, bruises, torn muscles, broken bones, eye and head injuries. The program also involves traveling to other towns to play games. As a parent or guardian, I attest and verify that I have full knowledge of the risks involved, and that my child is physically fit to participate in the Basketball program. In consideration for participation in this program, I hereby, for myself, my heirs, executors and administrators, waive and release all rights and claims against the Town of Alton, Alton Parks and Recreation, its officers, agents, employees and volunteers, except in the case of their sole negligence, from all losses, injury, damages, fees and other expenses arising out of or in connection with participation in the Basketball program. In addition, I give my permission for my child to be treated by qualified medical personnel in the event that the parent/guardian listed cannot be reached at the phone numbers provided.

Signature of Parent or Legal Guardian

Print Name of Parent or Legal Guardian

Date Signed

PARENTAL VOLUNTEER SUPPORT

Your help is needed to make the program work. Please consider being a volunteer.

- Coach – coordinate practice, demonstrate skills, encourage players
- Assistant – demonstrate skills and encourage, motivate and have fun with players