

3rd - 6th Grade Basketball Leagues



2022 ~ 2023



The Salina Parks & Recreation Department is offering Youth Basketball Leagues for students in 3rd through 6th grades. Separated divisions with a 3rd-4th grade league & 5th-6th grade league (predominately participated by boys, but girls are encouraged to participate as well). All participants must attend at least one of the skill assessments held at the **Salina Fieldhouse on: Wednesday, October 19 from 7:00pm—8:00pm or Saturday, October 22 from 2:00pm-3:00pm.**

Teams will practice once or twice/week from November - late January. Night's of practices are determined by the coach and/or facility availability. Teams will play two league games beginning in December 3 through January, with a post-season tournament, (14 games total). Dates are subject to change based on number of teams and facility availability. The majority of the games will be held at the Salina Fieldhouse. The Salina Parks & Recreation Department will provide all game equipment (including shirts). All participants who would like to play Youth Basketball should have their parent/guardian fill out the form below, enclose the \$75.00 participation fee and return it to the Salina Fieldhouse front desk, by the registration deadline.

Return To: Salina Fieldhouse 140 N Fifth Street Salina, KS 67401	Deadline: Wednesday, October 26, 2022 (785) 833-2260 www.salinafieldhouse.com
Participant's Name: _____ Address: _____	
City, State, Zip: _____	Birth Date: ____ / ____ / ____ Ht: ' ____ "
Phone: (cell) _____ (home) _____	Current Grade : ____ Male / Female (circle one)
T-Shirt Size: YS YM YL AS AM A L AXL AXXL	School: _____
Parent/Participants E-mail Address: _____	
Name(s) of Parent/Guardian/Emergency Contact: _____	
Home Phone: _____ Cell Phone: _____	
Special Instructions (medical problems or needs that should be brought to coaches' attention, etc.): _____	

Would you or someone you know be a good coach? If you're good with kids, and have a clean background record, that is all it takes. Name, address, phone number, & email of person that would be interested in coaching: _____ Cell Phone: _____ email (if available) _____ T-Shirt Size: _____	

CIRCLE ONE

A) Please rank your child on his or her athletic/basketball ability. **(1) being the highest**

1	2	3	4	5
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B) # of years played organized basketball?

1	2	3	4 or more
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PARTICIPANT CONSENT & RELEASE OF LIABILITY FORM MUST BE SIGNED BY A PARENT/GUARDIAN AT THE TIME OF REGISTRATION.

I as parent and/or legal guardian of the participant listed above, hereby give consent for my minor child to participate in this program and all other activities associated including, but not limited to: practices, actual participation, being a spectator, travel and/or any privacy (HIPPA Laws) connected with the activity. I agree to assume full responsibility in case of any accidental injury incurred while participating in this activity and/or associated activities.

I also acknowledge that the City of Salina Parks & Recreation Department may take photographs of me/my child while participating in Parks & Recreation sponsored activities and I grant permission for the Parks & Recreation department to use said photographs for the purpose of promoting and informing the community about Parks & Recreation activities.

Signature: _____ Date: _____

Scholarship forms are available at the Salina Fieldhouse, 140 N. 5th Street and must be approved PRIOR to the registration deadline. "These materials are neither sponsored nor endorsed by the Board of Education of U.S.D. 305, the superintendent or this school."

OFFICE USE ONLY!! AMT PAID: \$ _____ DATE PAID: ____ / ____ /22 INITIALS: _____