



Little “Bucks” Basketball Camp

Girls and Boys

Rawson Gym Entrance door #3

Saturday, Dec 2, 9, 16; Jan 6, 13, 20, 27; Feb 3, 10

No Program Dec 23 & 30



Instructor: Tom Stojsavljevic

Welcome! “Little Bucks” Basketball Camp promises to be lots of fun! We will be learning the fundamentals of basketball while emphasizing teamwork and good sportsmanship.

SEE REVISED TIMES:

Boys and Girls K-4 & K-5 **2:15-3:05PM** (time subject to change) Activity Code: LB201.201 \$36R/\$46NR

Boys and Girls 1st & 2nd gr **3:15-4:05PM** (time subject to change) Activity Code: LB201.202 \$36R/\$46NR

Parents are welcome and encouraged to stay and watch. Each week we may ask for parent volunteers for part of the time to assist us when we work on specific drills. There are many kids enrolled in each session, so your assistance is appreciated to keep things moving smoothly. Parents are welcome to move throughout the gym with their child. If you have other children with you who are not in the class, please keep close watch of them.

Gym Rules

- Please stay off the stage.
- Dress appropriately. Kids will be moving around.
- Tennis shoes are required .
- Shorts may be appropriate.
- Restrooms are located in the gym.
- Water fountains are located next to the gym.
- Please don't bring basketballs from home.

Chairs are available. At the end of class, please put chairs back in the rack. Register now online, mail, phone, in person. Call us at the SM Rec Dept. for more information 766-5082.



REGISTRATION FORM

South Milwaukee Recreation Dept.; 901 15th Avenue
South Milwaukee, WI 53172; 414-766-5081 or 414-766-5082
www.smrecdept.org



PART 1 - FAMILY INFORMATION (please print clearly)

Family Last Name: _____ First Name: _____

Address: _____ City: _____ Zip: _____

Home Ph:(____)-____-____ Business Ph:(____)-____-____ Cell Ph:(____)-____-____

E-mail address: _____

PART 2 - SIGN THE WAIVER/RELEASE

I, the undersigned, do hereby agree to allow the individual named herein to participate in the activities indicated. I am aware and understand there may be potential risk inherent with participation in any recreation activity, and that the School District of South Milwaukee does not provide accident insurance and cannot assume responsibility for injury to any participants in the recreation programs. I further understand the eligibility requirements for the program as stated in the department brochure or flyers and that there is no transfer of fees allowed or refunds given unless the department changes a class. I also agree to allow publication of any photos taken of me or the participant(s) at any program, event, or facility of the South Milwaukee Recreation Department.

Participant/Parent/Guardian Signature

Date

PART 3 - PARTICIPANT INFORMATION

Participant Name	M/F	DOB	Grade	Activity Name	Activity Code	Fee

Special Information (i.e. medical, physical, allergies): _____

Payment TOTAL FEES: \$ _____

Check # _____

Cash _____

PART 4 - MAIL-IN REGISTRATION FORM TO THE RECREATION DEPARTMENT

Mark your calendars! We do not send confirmations. The Recreation Department will contact you in case a class is full, or if there is a waiting list for the program for which you registered. You may assume your registration has been processed as requested unless you hear from us. Thank you for taking the time to register.

If you are signing up for a program that involves youth games, matches or meets, you must submit the CONCUSSION PARENT/ATHLETE AGREEMENT FORM at the time of registration. Concussion information and agreement form is available at the recreation dept. or online at www.smrecdept.org

Don't Forget!

Register Early