



EASTMONT PARKS & RECREATION

2008 EASTMONT BOYS YOUTH BASKETBALL REGISTRATION



Grade Divisions/Cost:

1st/2nd: \$35.00 (limited space)

3rd/4th: \$50.00 (limited space)

5th/6th: \$50.00 (limited space)

More than one family member: \$5 off 2nd child, \$10 off 3rd child

****There is a \$5.00 late fee after October 5th if space is available.**

Instructional 1st/2nd Grade Basketball Program: This program will cover the basic fundamentals of youth basketball and after each scheduled practice the gym will be open for parents to practice with their children. The program will be conducted at EHS on Saturday mornings 10-11:30 am from Nov.1st-Dec.13th with no practice the week of Thanksgiving (Nov. 22nd).

SKILLS ASSESSMENT

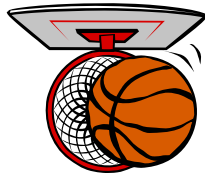
3rd/4th Grade: October 13 from 7:00-8:00 PM @ Eastmont Junior High School.

**Check-in will start at 6:30 PM.(no registrations taken at tryouts)

5th/6th Grade: October 15 from 7:00-8:00 PM @ Eastmont Junior High School.

**Check-in will start at 6:30 PM.(no registrations taken at tryouts)

****Practices will start the week of October 20 and games on November 1**
Season ends the week of December 15, 2008!**



Interested in coaching? A MANDATORY meeting will be:

Tuesday, October 7 @ Eastmont Parks Meeting Room at 7 PM
for 3rd-6th Grade Coaches ****2 Coaches per team****

PICTURE DAY!!

**Nov. 8th
@EJHS**



REGISTRATION: Please register daily or by mail from September 1st-October 10th from 8:00 AM-4:30 PM at:

****The office will be open the night of October 8th 4:30-7:30 PM for registrations!**

Eastmont Parks & Recreation Department
255 N. Georgia Ave
East Wenatchee, WA 98802
For more info please call 884-8015

*****Refunds:** Full refund before Oct. 20, 75% refunded before Nov. 1, 50% refunded before Nov. 17, after Nov. 17 no refunds will be given. ***

Participant Name: _____ Birthday: ___/___/___ Age: _____ Grade: _____

School: _____ Played or interested in playing AAU? Y N Yrs. Exp: _____

Shirt size Y-SM Y-M Y-L A-S A-M Height: _____

Address: _____ City: _____ Zip: _____

Parents Name: _____ Phone: (H) _____ (W) _____

Allergies, medications or other health needs: _____

Emergency Contact: _____ Phone: _____

I am interested in Coaching: _____ Age group: _____ Assistant Coach: _____ Age group: _____

In consideration of accepting my own or my child's registration, I herby, for myself and my child, our heirs, executors and administrators waive and release any and all rights and claims I or my child may have against Eastmont Parks and Recreation Department, its elected officials, employees and agents, Eastmont No. 206 & Wenatchee No. 246 School Districts for any and all personal injuries suffered by myself or my child at our registered activities sponsored by Eastmont Parks and Recreation Department.

Parent/Guardian Signature: _____ Print Name: _____ Date: _____

If mailing please send to: Eastmont Parks & Recreation Department
255 N. Georgia
(Please do not mail cash) East Wenatchee, WA 98802

