

# Viking Center Boys (3<sup>rd</sup>-6<sup>th</sup> Grades) Youth Basketball 2018/19

**5<sup>th</sup>/6<sup>th</sup> Grade Boys:** The 5<sup>th</sup> & 6<sup>th</sup> grade boys basketball regular season will begin late November/early December. The boys basketball practices days and times are TBD, once they are figured out we will let parents know. The tournament and game schedule will be played on Saturdays during January and February 2019. **Registration forms are due by Thursday November 15<sup>th</sup>.**

**3<sup>rd</sup>/4<sup>th</sup> Grade Boys:** The 3<sup>rd</sup> & 4<sup>th</sup> grade boys basketball regular season will begin late November/early December. The boys basketball practice days and times are TBD, once they are figured out we will let parents know. The tournament and game schedule will be played on Saturdays during January and February 2019. **Registration forms are due by Thursday November 15<sup>th</sup>.**



The cost of the program for all grade levels is FREE for Viking Center members and \$30 for non-members. Jerseys are not included in the program cost (please see below for uniform information). Checks can be made payable to: Viking Center, PO Box 42, Stanton, IA 51573. **Registration forms can be found and turned in at the Viking Center or the Stanton Elementary Office.**

*\*Schedules of scrimmages and tournaments will be available in December after the scheduling meetings. Coaches will distribute them once they are completed.*

*\*\*More information on practices will be available during camp. Practices are subject to change during the season.*

**\*\*Starting this year, it is mandatory that parents help out by volunteering with something during the basketball season, especially with the home basketball tournament. More details on this to come, but parents are expected to help. We thank you in advance for your cooperation.**

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I, \_\_\_\_\_, parent of \_\_\_\_\_, give my permission for him to participate in the **Viking Center Boys Youth Basketball** program. My signature below indicates that I waive the Viking Center and any coaches or other volunteers associated with the program from all responsibility of any injury that may occur.

Participant Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Phone Number: \_\_\_\_\_

Parent/Guardian Email Address: \_\_\_\_\_

## **Uniform size (If needed, cost is \$20):**

Jersey Size:    YS    YM    YL    AS    AM    AL    Other: \_\_\_\_\_

Jersey Number (list 3 options): \_\_\_\_\_

## **Please mark one:**

Non-Member of the Viking Center (\$30): \_\_\_\_\_

Viking Center Member (FREE): \_\_\_\_\_

Total Due (Registration and/or Uniform): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_