



Saratoga Springs Recreation Department

Register before
Oct 4 & Save!



Boys Youth Basketball Girls Youth Basketball



Boys Basketball

Intro Dates: Nov 7-Feb 6
 *No program 11/28, 12/26, 1/2
Dates: Nov 3-Feb 9
Times: Wknights 5:30-9:00pm
 Saturday 9am-8pm
Intro Grades K-1: *co-ed* Sat
Grades 2-3: Wed & Sat
Grades 4-5: Thur & Sat
Grades 6-7: Tues & Sat
Grades 8-12: *co-ed* Wed & Sat

*Days and Times subject to change

Location: Recreation Center

Early Bird Special Fees:

Intro: C \$50, S \$75, N \$100
Grades 2-12: C \$80, S \$100, N \$125

After Early Bird Fees:

Intro: C \$75, S \$100, N \$125
Grades 2-12: C \$105, S \$125, N \$150

Intro Meeting: Thur, Oct 22, 7:00pm

Coaches Meeting: Tues, Oct 20

Gr 4-12 6:00-7:00pm, Gr 2-3 7:00-8:30pm

Skill Evaluation: Gr 6-7: Tue, Oct 27/Gr 4-5:

Wed, Oct 28 / Gr 8+: Thur, Oct 29

Girls Basketball

Intro Dates: Nov 7-Feb 6
 *No program 11/28, 12/26, 1/2
Dates: Nov 2-Feb 8
Times: Wknights 5:30-7:30pm
 Saturday 9am-12noon
Intro Grades K-1: *co-ed* Sat
Grades 2-4: Mon & Sat
Grades 5-8: Mon & Sat

*Days and Times subject to change

Location: Recreation Center

Early Bird Special Fees:

Intro: C \$50, S \$75, N \$100
Grades 2-12: C \$80, S \$100, N \$125

After Early Bird Fees:

Intro: C \$75, S \$100, N \$125
Grades 2-12: C \$105, S \$125, N \$150

Intro Meeting: Thur, Oct 22, 7:00 pm

Coaches Meeting: Thur, Oct 22

Gr 5-8 6:00-7:00pm / Gr 2-4 7:00-8:30pm

Skill Evaluation (Gr 5-8 only): Mon, Oct 26

Our Intro to Basketball Co-ed program for Grades K-1 is a great way to become introduced to the sport and learn basic skills. Special events may include occasional instruction from high school varsity basketball coaches from the area or a special guest. Our youth basketball program for Grades 2-12 emphasizes fun, team play and sportsmanship, as well as skills development. Please be sure you are committed to the program prior to signing up. If you drop out after teams are formed, it will effect the entire team.

Intro Coordinator: Ron Lewis, Head Coach

Youth Coordinator: George Parker, Youth Basketball Coach since 1975

Basketball fanatics take note... Share your love of the game with our players! Join us courtside as a volunteer Coach. Two Volunteer Coaches are needed per team. Early Bird Registration Fee is waived before 10/4/15 for the child of each coach. \$25 Registration fee will apply after 10/4/2015.



Saratoga Springs Recreation Department
 15 Vanderbilt Ave Saratoga Springs, NY 12866
 518-587-3550 ext 2300 recreservations@saratoga-springs.org

Download forms at: www.SaratogaRec.com



2015–2016 Saratoga Springs Boys & Girls Recreation Basketball Program



Dear Parents/Guardians,

Welcome to the Saratoga Springs Recreation Department Kindergarten through 12th grade boys and girls youth basketball program. Our program emphasizes fun, team play, sportsmanship, as well as skills development. The beginner group (k/ 1st grade) will be introduced to the basketball fundamentals which include dribbling, shooting, passing and defensive/offensive skills. These fundamentals are taught and put into play through interaction between coaches, players and parents. Special events may include occasional instruction from high school varsity basketball coaches from the area or a special guest. Girls grade 2 – 8 and boys grade 2-12 practice, scrimmage and play games in accordance with rules and guidelines established for each grade grouping.

Please note that the girls' grouping have changed as shown in the schedule below:

- K and 1st Grade (Co-Ed Meet on Saturday's)**
- 2nd and 3rd Grade Boys (Meet on Wed and Sat*)**
- 2nd thru 4th Grade Girls (Meet on Mon and Sat*)**
- 4th thru 5th Grade Boys (Meet on Thurs and Sat*)**
- 5th thru 8th Grade Girls (Meet on Mon and Sat*)**
- 6th and 7th Grade Boys (Meet on Tues and Sat *)**
- 8th thru 12th Grade Boys (Co-Ed Meet on Wed and Sat*)**

The registration fee is discounted from August 10, 2015 to October 4, 2015. Please encourage your neighbors and friends to avoid the higher fee by registering before October 4, 2015.

The success of our program depend on community involvement especially parents, relatives and friends. We are counting on volunteers to join our coaching staff to provide our youths with the best experience possible this season. The registration fee is waived for the child of each coach who volunteers before October 4, 2015. Please sign up to be a coach.

There will be a skills evaluation at the Recreation Facility for boys in grades 4 -12 and girls in grades 5-8

The coaches meetings and the skills evaluation will be held as listed in the table below:

Boys coaches meeting	October 20, 2015	Skills Evaluation	Date	Time
Grades 4-12	6:00 PM	Girls Grades 5-8	Mon. Oct 26, 2015	5:30 PM
Grades 2-3	7:00 PM	Boys Grades 6-7	Tue. Oct 27, 2015	5:30 PM
		Boys Grades 4-5	Wed. Oct 28, 2015	5:30 PM
Girls coaches meeting	October 22, 2015	Boys Grades 8-12	Thur. Oct 29, 2015	5:30 PM
Grades 5-8	6:00 PM			
Grades 2-4	7:00 PM			

Boys grades 2-3 and girls grades 2-4 will pick their team at the coaches meeting. The coaches meeting will be held in the Recreation Center Multi Purpose Room.

For the **skills evaluation** players will be evaluated in alphabetical order. Teams will be formed following the evaluation. Practice schedules will be given out by the coaches at the team's first practice. **All Practices and games will be at the Recreation Facility located at 15 Vanderbilt Avenue.** Please note that practices and games may still be held even if school is canceled that day. The coach will contact you if a practice or game is canceled.

***The days are subject to change depending on the number of teams and the winter weather.**

~~~~~ GEORGE PARKER BASKETBALL COORDINATOR ~~~~~



# City of Saratoga Springs Recreation Department

## 2015 Youth Basketball Registration

Early Bird Registration Period Aug10–Oct 4

Please  
Print  
Clearly

| PARTICIPANT INFORMATION |       |                          |                                     |                                         |            |                          |
|-------------------------|-------|--------------------------|-------------------------------------|-----------------------------------------|------------|--------------------------|
| Circle one:             |       | <b>City Resident (C)</b> | <b>School District Resident (S)</b> | <b>Non School District Resident (N)</b> |            |                          |
| Last Name               | First | Male<br>Female           | Current Grade                       | Gr Entering Sept. 2015                  | Birth Date | Age                      |
| Address                 |       | City                     | State                               | Zip Code                                | School     |                          |
| Parent / Guardian Name  |       | First                    | Email                               |                                         |            | Primary Phone<br>(     ) |

Have you completed the 2015 Annual Permission agreement?     Yes     No    If yes, Card Color: \_\_\_\_\_ Card #: \_\_\_\_\_

| YOUTH BASKETBALL                                                         |                                           |                 |                 |                                                     |                 |                 |
|--------------------------------------------------------------------------|-------------------------------------------|-----------------|-----------------|-----------------------------------------------------|-----------------|-----------------|
| Circle your child's skill level:    Beginner    Intermediate    Advanced |                                           |                 |                 |                                                     |                 |                 |
| Player's Jersey Size- Youth: S M L    Adult: S M L XL XXL                |                                           |                 |                 |                                                     |                 |                 |
| <u>Circle Level</u>                                                      | <u>Before Early Bird Registration Fee</u> |                 |                 | <u>After Early Bird Registration (After Oct. 4)</u> |                 |                 |
|                                                                          | <u>Circle Applicable Fee</u>              |                 |                 | <u>Circle Applicable Fee</u>                        |                 |                 |
|                                                                          | <b>C</b>                                  | <b>S</b>        | <b>N</b>        | <b>C</b>                                            | <b>S</b>        | <b>N</b>        |
| Intro to BBall (K/1st)                                                   | \$50<br>6PBWMC                            | \$75<br>6PBWMS  | \$100<br>6PBWMN | \$75<br>6PBWMC                                      | \$100<br>6PBWMS | \$125<br>6PBWMN |
| <u>Boys Basketball</u>                                                   |                                           |                 |                 |                                                     |                 |                 |
| Grade 2-3                                                                |                                           |                 |                 |                                                     |                 |                 |
| Grade 4-5                                                                | \$80<br>6PBWMC                            | \$100<br>6PBWMS | \$125<br>6PBWMN | \$100<br>6PBWMC                                     | \$125<br>6PBWMS | \$150<br>6PBWMN |
| Grade 6-7                                                                |                                           |                 |                 |                                                     |                 |                 |
| Grade 8-12 *coed                                                         |                                           |                 |                 |                                                     |                 |                 |
| <u>Girls Basketball</u>                                                  |                                           |                 |                 |                                                     |                 |                 |
| Grade 2-4                                                                | \$80<br>6PBWFC                            | \$100<br>6PBWFS | \$125<br>6PBWFN | \$100<br>6PBWFC                                     | \$125<br>6PBWFS | \$150<br>6PBWFN |
| Grade 5-8                                                                |                                           |                 |                 |                                                     |                 |                 |

| Volunteering                                                                            |                                                                          |
|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| Shirt - Adult: S M L XL XXL                                                             |                                                                          |
| <u>Your Name</u>                                                                        |                                                                          |
| <u>Level Volunteering For</u> (ie. Intro to BBall, Grade 2-3, etc...)                   |                                                                          |
| <ul style="list-style-type: none"> <li>• Must Complete Volunteer Application</li> </ul> |                                                                          |
| Before Early Bird Registration Fee: Free                                                | After Early Bird Registration Fee (after Aug 9 - per Child): \$25 6RLATE |

| OFFICE USE ONLY                                                                                                                                                 |          |               |       |          |                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------|-------|----------|-----------------|
| City/School District Proof (tax bill, s/b/l number, water/sewer bill, lease agreement)                                                                          |          |               |       |          |                 |
| Cash Amount:                                                                                                                                                    | Check #: | Total Amount: | Date: | Batch #: | Staff Initials: |
| There will be no reminder phone calls about the clinics/programs, please keep the calendar of dates! Please make checks payable to the Commissioner of Finance. |          |               |       |          |                 |



**City of Saratoga Springs' Recreation Department**  
**Child Recreation Permission Agreement**

Print Clearly

| CHILD'S INFORMATION |                  |                |                      |            |
|---------------------|------------------|----------------|----------------------|------------|
| Child's Last Name   | First            | Male<br>Female | Current Grade        | Birth Date |
| Street Address      | City             | State          | Zip                  | Age        |
| Email               | School Attending |                | Primary Phone<br>( ) |            |

| PARENT/GUARDIAN INFORMATION   |       |                           |       |             |
|-------------------------------|-------|---------------------------|-------|-------------|
| Parent/Guardian Last Name     | First | Parent/Guardian Last Name | First |             |
| Street Address (if different) | City  | State                     | Zip   | Cell<br>( ) |
| Email (if different)          |       |                           |       | Home<br>( ) |

| EMERGENCY MEDICAL AUTHORIZATION FORM                                                                                                                                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Pertinent Medical Information: Please list any allergies/medical problems, including those requiring maintenance medications.<br>Please attach additional sheets if necessary. IF NONE MARK N/A |
| Allergies                                                                                                                                                                                       |
|                                                                                                                                                                                                 |
|                                                                                                                                                                                                 |

| EMERGENCY CONTACTS (if you need additional contacts please attach) |       |                       |              |
|--------------------------------------------------------------------|-------|-----------------------|--------------|
| Last Name                                                          | First | Relationship to Child | Phone<br>( ) |
| Last Name                                                          | First | Relationship to Child | Phone<br>( ) |

| MEDICAL AGREEMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|
| I fully understand and acknowledge that there are inherent risks and dangers in my child's participation in recreational activities and that my child's participation in said activities and use of any equipment related to said activities may result in injury, illness or death and damage to personal property. I understand other participants, accidents, forces of nature or other causes may cause these risks and dangers and I hereby accept those risks. In the event of an emergency, I hereby authorize my child to be treated by Certified Emergency Personnel (i.e. EMT, First Responder, and/or Emergency Department Physician). It is understood that reasonable efforts shall be made to contact the undersigned prior to rendering treatment, but that any treatments will not be withheld if the undersigned cannot be reached. I assume full responsibility for any medical treatment rendered on behalf of my child. |      |
| Parent / Guardian Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Date |

| RECREATION AGREEMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|
| Please consult your child's physician prior to your child's participation in any City of Saratoga Springs Recreation Program. If there are questions as to whether or not your child may be capable of participating in any activity sponsored by the City of Saratoga Springs Recreation Commission, please contact the City's Recreation Department at (518) 587-3550 extension 2300. In that your child has expressed a desire to participate in a City sponsored Recreation Program, it is important for you and your child to understand the goals and rules established for the Program. Each child will have Rules of Conduct explained to him/her prior to the start of any activity. He/she must observe the rules as explained and accept the consequences of behavior modification if needed as outlined in the Recreation Handouts.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |      |
| In signing this agreement, I acknowledge that I fully understand there are inherent risks and dangers associated with my child's participation in Recreation sponsored activities. I also understand and acknowledge my child's participation in these activities and use of any equipment related to such activities may result in injury, illness or death and damage to personal property. I understand other participants, accidents, forces of nature or other causes may cause these risks and dangers and hereby accept those risks. I understand that my child may be photographed or videoed and his/her name may be used for publicity purposes for the Saratoga Springs Recreation Program. I hereby agree to give permission for my child to participate in City sponsored Recreation Program activities and acknowledge no physical or emotional issue which would prohibit him/her from participation. I agree to indemnify and save harmless the City of Saratoga Springs from and against all claims, damages, losses and expense (including, but not limited to, attorneys' fees), arising out of my child's participation in Recreation Commission sponsored events provided that any such claim, damage, loss or expense is not directly attributable to bodily injury, sickness, disease, or death, or to injury to or destruction of property caused by the negligent act or omission of the City, its agents or employees. |      |
| Parent / Guardian Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Date |