

ALGONA RECREATION DEPARTMENT

BOY'S & GIRL'S 5TH & 6TH GRADE *BASKETBALL PROGRAM*

It's time to get registered for the *Algona Recreation Department's* 5th & 6th grade basketball program. It will be held at the **BERTHA GODFREY** gym. Girls program will be held on Tuesdays and Thursdays, February 7 – March 15 at 4:30 & 5:15 PM. Boys program will be held on Mondays and Wednesdays, February 8 – March 19 at 4:00 & 4:45 PM. Cost is \$15 per person.



If you would like to participate in this program, please have your parents read and complete the registration form below. Then either **MAIL IT OR DROP IT OFF**, along with the \$15 fee to the ***Algona Recreation Department, City Hall, 112 W. Call St., Algona, IA 50511.***

All registration forms must be returned to the Rec. Dept. office no later than ***Friday, January 20.*** *Team rosters and first practice times will be emailed to all participants.* Any questions, call the Rec. Dept. in City Hall at 295-9251.



Algona Recreation Department 5th & 6th Grade BOY'S & GIRL'S BASKETBALL COST \$15

Name _____

Grade _____

Address _____

Height _____ ft. _____ in.

Phone _____ Email _____

Boy _____ Girl _____

RELEASE AND INDEMNIFICATION AGREEMENT

I hereby request that you accept my child's application for registration in this Algona Recreation Department program. With consideration of your acceptance of my child, I hereby release the City of Algona, its employees, and the coaches and volunteers associated with this program from all claims which may arise in the event my child is injured in an accident that occurs while he or she is participating in this program. I further agree to indemnify the City of Algona, its employees, and the coaches and volunteers associated with this program for any claim, which may hereafter be presented on behalf of my child as a result of any such injuries. I hereby acknowledge that it is my responsibility, not the responsibility of the City of Algona, to provide medical insurance coverage in the event I desire to have medical insurance coverage for my child while he or she participates in this particular activity.

Parent or guardian _____

Date _____

Some limited financial assistance is available, however it will not fully fund your child's participation fee. If you desire financial help, please consider partial payment and check the box.

*****REGISTRATION DEADLINE, FRIDAY, JANUARY 20*****