

De Soto Parks & Recreation

Youth Basketball Clinic

For: ALL Girls & Boys in Kindergarten thru 6th Grade (Fall 2010)

Fee: \$30.00

Deadline: Saturday, November 6, 2010

You will not receive a clinic shirt after this date.

Location: De Soto Community Center - Gym
32905 W. 84th St.

Time: 9:00am - Kindergarten & 1st Grade
10:00am - 2nd & 3rd Grade
11:00am - 4th, 5th & 6th Grade



Clinic Dates: November 6th - 13th - 20th
December 4th - 11th - 18th

Information: A clinical setting designed to provide youth with instructions on the fundamentals of basketball, with an emphasis on teamwork and sportsmanship.

***** Please keep a record of dates & times of the camp, confirmations are not sent out. *****

WAIVER AND RELEASE: The undersigned states that he/she understands that the City of De Soto, and any of its agents, officers, or employees, are not and shall not be responsible for or liable for any illness, or injury to person or damage to property resulting from the program in which the participant is enrolling or from his/her participating in said program, and the participant, and his/her parent or guardian if the participant is a minor or under other legal disability, hereby forever releases and holds harmless the City of De Soto, its employees, agents, officers, and representatives from any and all claims of any kind that the participant, or their respective heirs, executors, administrators, or assigns may have or claim to have resulting from participation in said program. This waiver and release applies to any claim for damage or injury even if the claim is alleged to have been caused by the negligence of the City, its departments, or any of its agents, officers, or employees. Also, the participant, and/or their parent or guardian, authorize the De Soto Parks and Recreation to use at its discretion any photograph (s) (black/white or color) taken of the participant in the program and waive any and all claims that the participant or their heirs, executors, administrators, or assigns may have or claim to have resulting from such photograph(s) or reproductions thereof.

I have read and understand the waiver and release statement: registration invalid without signature of adult.

Participant's Name: _____

Address: _____

Date of Birth: _____ School You Attend: _____ Grade: _____

Shirt Size (Circle): Youth Small Youth Medium Youth Large
Shirts 100% Cotton
 Adult Small Adult Medium Adult Large

Guardian's Name: _____

Contact Phone #: _____ E-Mail Address: _____

Guardian's Signature: _____

Registration Drop Off & Mailing Information:

De Soto Parks & Recreation
32905 W. 84th St.
P.O. Box C
De Soto, KS 66018

Questions Call: Justin Huslig
(913) 583-1182 x 131