



GRADES K & 1

ROOKIE BASKETBALL

CLINIC

The program meets in the Chester Elementary School multipurpose room.

Kindergarten: Wednesdays, 3:15 until 4:15pm January 18, 25, February 1, 8, 15

FEBRUARY 8 MEETS 1:15 UNTIL 2:15PM DUE TO EARLY SCHOOL DISMISSAL.

Grade 1: Thursdays, 3:15-4:15pm January 19, 26, February 2, 9, 16

THERE IS NO FEE FOR THIS PROGRAM!

This program is staffed by our CIAC Certified Coach Randy Netsch, assisted by our summer staff. All supervisors are certified in first aid and CPR. Our employees may assist with inhalers and epinephrin auto injectors. If your child may need medication during the program, please request an authorization form and

emergency action plan from your healthcare provider and submit with the medication to the Director of Parks and Recreation at 860-526-0013, x223 or parkrec@chesterct.org. Provide the Director or the Sports Director with the form and medication by the first clinic meeting.



SUBMIT REGISTRATION BY JANUARY 13, 2023!

Please have your child wear sneakers, comfortable clothing, and bring a water bottle and snack if they are staying after school for this program.

The registration form is your child's permission slip to stay after school on the dates Rookie Basketball meets. For the safety of your child, all registered players will be kept after school unless the Chester Elementary School Office, at 860-5126-5797, and the Parks and Recreation Office at 860-790-0124 or chesterct.org, are notified in advance.

Children not registered in the program must be accompanied, and closely supervised, by an adult. They are NOT PERMITTED ON THE COURT.

OUR STAFF WILL ESCORT CHILDREN TO THE CAFETERIA DOORS FOR SIGN-OUT.

ALL PARTICIPANTS MUST BE SIGNED OUT after each practice BY SOMEONE AUTHORIZED BY THE PARENT. To add an authorized adult to your child's registration, please send a note or an e-mail.



ACCORDING TO CONNECTICUT GENERAL STATUTE 19a-77 WE ARE REQUIRED TO DISCLOSE THAT TOWN OF CHESTER PROGRAMS ARE NOT LICENSED BY THE STATE OFFICE OF EARLY CHILDHOOD.

YOUTH BASKETBALL REGISTRATION FORM

Grades K & 1

Return this registration (*there is no fee*) to the Parks and Recreation mailbox in the Town Hall, Chester Elementary School, or mail to: Town of Chester, Parks and Recreation, 203 Middlesex Avenue, Chester, CT 06412

ALL REGISTRATION MUST BE RECEIVED BY JANUARY 12, 2023!

Child's Name _____ Grade _____

This child has suffered a previous concussion (circle): YES NO

Name(s) of Parent(s) or Guardian(s) _____ e-mail _____

Home Phone Number _____ Number During Program _____

List any concerns the coach should be aware of:

The following people may sign out my child:

Emergency Names and Phone Numbers:

PLEASE INDICATE AT THE TOP OF THIS FORM if you do not wish your

CHILD'S PHOTO to appear in newspapers, on the Town web site, social media, flyers, e-mails, or on bulletin boards.

I give permission for my child, named above, to participate in the Chester Parks and Recreation Youth Basketball Program, January 18 through February 16, 2023. I understand there are inherent risks to this activity, and I assume those risks.

This registration form is your child's permission slip to stay after school on the dates Rookie Basketball meets. For the safety of your child, all registered players will be kept after school on these dates, unless the Chester Elementary School Office, at 860-5126-5797, and the Parks and Recreation Office at 860-790-0124 or chesterct.org, are notified in advance.

signature of parent or guardian

date