

Y BASKETBALL™

We build strong kids, strong families, strong communities.

MIGHTY-MITE BASKETBALL

2012 Winter Session 2 • Ages 4-5 Coed

For more information, contact Rachel Joffe at 754-6654 ext. 109 or rjoffe@ymcajanesville.org.

Early Registration Nov. 28-Dec. 30

Late Registration (\$10 T-Shirt) Dec. 31-Jan. 4

Coaches Meeting January 4 @ 6 pm

Practices Begin January 14

First Game January 28

Last Game February 25

Registration Fee (T-shirt included with early registration)

\$30 Member • \$60 Non-member

Scholarships and financial aid are available.

Refunds/Cancellations: Refund or credit issued only if YMCA cancels program.

GENERAL INFORMATION:

- This program is designed for boys and girls ages 4 to 5.
- Practices & Games are held at local elementary schools.
- These leagues allow your child to develop fundamental basketball skills while promoting family values such as RESPECT, RESPONSIBILITY, CARING, and HONESTY.
- The first 2 weeks of the season will consist of practices, the last 5 weeks will be games.
- The success of this program depends upon parent involvement with their children. That is why we offer parents an opportunity to take part as a Coach or Assistant Coach.
- Our Mighty Mite program will use junior size balls and shoot at 8 foot rims.
- Late sign ups will be placed on a waiting list. An attempt will be made to get child on a team.
- **Parents will be contacted after coaches meeting regarding first practice.**

Mighty-Mite Registration Form—One Form Per Person

Register by mail, in person or fax credit card information to 608-754-9024 attention Rachel Joffe.

Child's Name: _____

Male Female Member Non-Member

School: _____ Grade: _____ Age: _____ Birth Date: _____

Mother's Name: _____ Work/Cell Phone: _____

Father's Name: _____ Work/Cell Phone: _____

Home Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

SHIRT SIZE: Child S Child M Child L Adult S Adult M Adult L Adult XL

Payment Method

Cash (in person only)

Check # _____

Credit Card Visa Master Card

Name on Card _____

Card # _____

Expiration Date _____

3-Digit Verification Code (on back of card) _____

Signature _____

AMOUNT ENCLOSED _____

If you would like to be placed with a specific coach or on a specific team please let us know in the space provided.

Special Requests cannot be honored if registration is received during late registration periods.

SPECIAL REQUEST: _____

I WOULD BE WILLING TO VOLUNTEER AS A:

Coach Assistant Coach

Name: _____ Phone: _____

