



# SOUTH MILWAUKEE RECREATION DEPARTMENT

**Welcome! “Little Bucks” Basketball Camp** promises to be lots of fun! We will be learning the fundamentals of basketball while emphasizing teamwork and good sportsmanship.

**Rawson School Gym Saturday, Dec 5, 12, 19; Jan 9, 16, 23, 30; Feb 6, 13** *No Program Dec 26 & Jan 2*

Boys and Girls K-4 & K-5 **2:15-3:05PM** *(time subject to change)*  
Activity Code: LB201.201 \$36R/\$46NR

Boys and Girls 1st & 2nd grade **3:15-4:05PM** *(time subject to change)*  
Activity Code: LB201.202 \$36R/\$46NR

Parents are welcome and encouraged to stay and watch. Each week we may ask for parent volunteers for part of the time to assist us when we work on specific drills. There are many kids enrolled in each session, so your assistance is appreciated to keep things moving smoothly. Parents are welcome to move throughout the gym with their child. If you have other children with you who are not in the class, please keep close watch of them.

## Gym Rules

- Please stay off the stage.
- Dress appropriately. Kids will be moving around.
- Tennis shoes are required.
- Shorts may be appropriate.
- Restrooms are located in the gym.
- Please don't bring basketballs from home.



Chairs are available. At the end of class, please put chairs back in the rack. Register now online, mail, phone, in person. Call us at the SM Rec Dept. for more information 766-5081.



# REGISTRATION FORM

## MAIL REGISTRATION

South Milwaukee Recreation Dept.  
 South Milwaukee, WI 53172  
 417-766-5081 or 414-766-5082  
 www.smrecdept.org

## WALK-IN REGISTRATION

South Milwaukee High School  
 Park on east side of the high school  
 Enter through Door #24

Family Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Ph:(\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Business Ph:(\_\_\_\_)- \_\_\_\_\_ - \_\_\_\_\_ Cell Ph:(\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

I, the undersigned do hereby agree to allow the individual named herein to participate in the activities indicated. I am aware and understand there may be potential risk inherent with participation in any recreation activity, and that the School District of South Milwaukee does not provide accident insurance and cannot assume responsibility for injury to any participants in the recreation programs.

I am familiar with the program eligibility requirements and I further understand that there are no fee transfers and refunds. I also agree to allow publication of any photos taken of me at any program, event, or facility sponsored by the South Milwaukee Recreation Department.

I have read and fully understand the concussion protocols for athletes and will turn in the Concussion Parent/Athlete Agreement Form at the time of registration. This form and additional concussion information is available online at www.smrecdept.org. You may also pick up the form in the Recreation Dept. Office.

\_\_\_\_\_  
 Participant/Parent/Guardian Signature Date

Participant Name	M/F	Date of Birth	Grade	Activity Name	Activity Code	Fee

Special Information (i.e. medical, physical, allergies:): \_\_\_\_\_

Total: \$ \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_ Money Order \_\_\_\_\_

Make checks or money order payable to the South Milwaukee Recreation Department

Please Circle the Youth T-Shirt Size if one is given as part of the registration XS S M L XL

*Sign up NOW!*