Kaukauna Recreation Department
2020 Boys Little Dribblers

The Kaukauna Recreation Department and The Kaukauna High School Boys Basketball Program are teaming up to present an instructional basketball program for boys in first through fourth grade. Players will learn and practice the fundamental skills of dribbling, shooting, passing, defense and more as directed by Kaukauna High School players and coaches.

PLEASE NOTE: Registrations will NOT be taken at the gym, and ALL players MUST be pre-registered at the Recreation Department to participate.

Grades: 1st - 4th Grade Boys
Location: Kaukauna High School Gym
Schedule:

Day	Date	Time: Grades 1 & 2	Time: Grades 3 & 4
Sunday	January 5	12:00-1:30 pm	1:30-3:00 pm
Sunday	January 12	12:00-1:30 pm	1:30-3:00 pm
Sunday	January 19	12:00-1:30 pm	1:30-3:00 pm
Sunday	January 26	12:00-1:30 pm	1:30-3:00 pm
Sunday	February 2	12:00-1:30 pm	1:30-3:00 pm
Sunday	February 9	12:00-1:30 pm	1:30-3:00 pm

Special Date: **February 7: The Little Dribblers will perform at half-time of the KHS JV and Varsity Ghosts games vs Appleton West! (Coach will provide more details)**

Coaches: KHS Coaching Staff and Kaukauna High School Players
Cost: City & School Residents $20.00; Non-Residents $30.00 (includes T-shirt & basketball)
Deadline: **December 13**. **Registrations accepted after this date will not include a t-shirt!**
Basketballs will be issued on a first-come; first-served basis while supplies last!

Registrations will be taken via mail or in person at:

Kaukauna Recreation Department
PO Box 890
207 Reaume Avenue (New Address!)
Kaukauna, WI 54130
(Please make checks payable to: City of Kaukauna)

For More Information: 920-766-6335

2020 Boys Little Dribblers Registration Form

Name _____ Birth Date _____ Grade _____

Address _____ City _____ Phone _____

Email _____ Shirt (circle) S (6-8) M(10-12) L(14-16) Youth Sizes S M L Adult Sizes

I hereby agree to release, discharge, indemnify and save the City of Kaukauna and its departments, employees and agents harmless from any and all liability claims, damages and causes of action and costs of defense including attorney fees and other costs of whatever kind or nature which may arise or which result from participating in the above mentioned program. This is also my written permission to have my child admitted and attended to for medical and/or dental treatment in case of sickness or injury. This release shall be binding on the player's heirs, assigns, executors and administrators.

Parent/Guardian Name (please print) _____

Parent/Guardian Signature _____ Date _____