

BOB FREESEN YMCA

Basketball Skills Camp Registration Form



Name: _____

Grade: _____

Address: _____

Age: _____

Phone: _____

Please Circle a grade and time preference:

1st & 2nd grade

3rd & 4th grade

Male/Female

5-6 p.m. 6-7 p.m.

5-6 p.m. 6-7 p.m.

5-6 p.m. 6-7 p.m.

Amount Paid: _____

Paid by: check / cash / credit card

Staff Initials: _____

Date: _____



BOB FREESEN YMCA

1000 Sherwood Eddy Lane

Jacksonville, IL 62650

P 217-245-2141

B



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

BASKETBALL SKILLS CAMP 2020-2021

BOB FREESEN YMCA



YMCA CO-ED BASKETBALL SKILLS CAMP

**1ST/2ND GRADES
3RD/4TH GRADES
5TH/6TH GRADES**

The Basketball Skills Camp is an instructional program focusing on the fundamental skills. Due to restrictions there will be no games. Focus will be on skills and drills.

Participants will need a basketball.

All participants must follow IDPH Guidelines. Anyone not participating in gameplay should sit on the sidelines 6-feet apart from one another. Social distancing must be observed. Face masks must be worn when indoors and not actively participating. 30-feet social distancing will be observed between groups. Spectators are limited to immediate household members or guardians of participants.



6-Week Session
(OFF CHRISTMAS WEEK & NEW YEARS WEEK)

1st/2nd Grades

Monday 5-6 p.m. & 6-7 p.m.

Play Begins: Mon., Dec. 7

3rd/4th Grade

**Tuesday 5-6 p.m. &
6-7 p.m.**

Play Begins: Tues., Dec. 8

5th/6th Grade

**Wednesday 5-6 p.m.
6-7 p.m.**

Play Begins: Wed., Dec. 9

**Fees: Members: \$25
Non-Members: \$60**

**Registration Deadline:
1 week prior to play start date!**

If you miss the deadline, please contact sports director,
217-245-2141.

(A \$5 late fee will be applied to the original registration fee.)



In consideration for my child's acceptance as a participant in the athletic program of the Bob Freesen YMCA, I, for myself, my child, my heirs, executors, administrators, and assigns, do hereby release and discharge the Bob Freesen YMCA, its agents, representatives, officers, directors or employees of and from all claims or demands for damages, losses, or injuries incurred by my child during the course of participation in programs at the Bob Freesen YMCA. I give my consent, now and for all time, to YMCA of the USA, YMCA and collaborating third parties to make, reproduce, edit, broadcast or rebroadcast: video film or footage of my child, sound track recordings of my child, photo reproductions of my child, and any narrative account of my child's experience. My consent gives permission to use the above materials for publication, display, sale or exhibition in promotions, advertising, education and legitimate business uses. Use includes reproductions in any form and media, adaptations and/or revisions, throughout the world and forever. I understand and agree there may be no compensation for this, and I will not make any claim for payment of any kind. I may, or may not be, identified in such reproductions; however, my name will not be used to endorse any particular commercial products or commercial services.

Date

Parent or Guardian