

# BOYS SUMMER BASKETBALL

AT THE RECREATION CENTER

**DIRECTED BY TODD HANSON,  
BHS BOYS VARSITY BASKETBALL COACH**

**Limited to Brunswick Residents**

**Boys entering Gr. 3 to 9 in the fall of 2010**

**Mon. - Thurs., July 6\* - 22**

**TIMES:**

**Gr. 5 & 6; 8:15-9:45 a.m.**

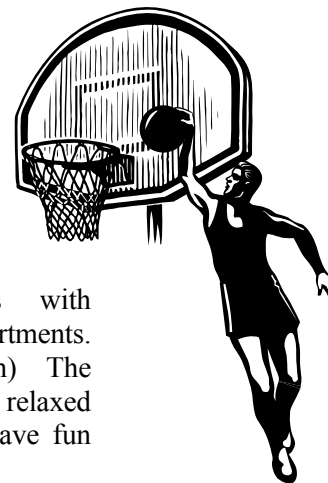
**Gr. 3 & 4; 10:00-11:00 a.m.**

**Gr. 7 & 8; 11:30 a.m.-1:00 p.m.**

**Gr. 9; 1:15-2:30 p.m.**

**FEE: \$34.00**

The Brunswick Parks & Recreation Department is offering a Summer Basketball program for Brunswick boys entering grades 3 to 9 in the fall of 2010. Emphasis is placed on skill development, fundamentals and games with neighboring recreation departments. (Bath, Lewiston & Topsham) The program is run in a low-key, relaxed manner where participants have fun improving their game.



Directed by **Todd Hanson, BHS Boys Varsity Basketball Coach.**

All HOME games will be played during the time each age group regularly meets and AWAY games at the convenience of the host team. Extra time will be required for travel to AWAY games. Bus transportation will be provided. Participants will receive a schedule at the first session. There is a \$34.00 registration fee, which includes a T-shirt.

Visit us online at [www.brunswickme.org/parkrec](http://www.brunswickme.org/parkrec).

**\*DUE TO THE JULY 4 HOLIDAY, THERE WILL BE NO BASKETBALL ON MONDAY, JULY 5!**

The Parks and Recreation Department encourages individuals with disabilities to register for this program. Should you desire further information, contact the Recreation Department at 725-6656

✂ **Detach & return with fee** to the Brunswick Recreation Center, 30 Federal St. by **June 30**. Office Hours Mon-Fri 8 a.m. - 4:30 p.m. ✂

**BRUNSWICK PARKS & REC DEPT. BRUNSWICK RESIDENTS ONLY**  
**BOYS SUMMER BASKETBALL 2010 FEE: \$34.00** Boys entering Grades 3 to 9 in Fall, 2010

(Please Print)

NAME \_\_\_\_\_ GRADE, fall 2010 \_\_\_\_\_  
 STREET ADDRESS \_\_\_\_\_ TOWN \_\_\_\_\_  
 ZIP \_\_\_\_\_ TOWN OF RESIDENCE \_\_\_\_\_  
 SCHOOL \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ AGE \_\_\_\_\_  
 HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_  
 CELL PHONE \_\_\_\_\_ PAGER \_\_\_\_\_ EMAIL \_\_\_\_\_  
 EMERGENCY PERSON, other than parent: \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_  
 DAY PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

For Office Use

Date \_\_\_\_\_  
 Amt\$ \_\_\_\_\_  
 Rec.# \_\_\_\_\_  
 Computer

\*ALLERGIES/PHYSICAL OR EMOTIONAL LIMITATIONS \_\_\_\_\_  
 \*WOULD YOU LIKE TO BE CONTACTED BY OUR THERAPEUTIC RECREATION COORDINATOR REGARDING THE ABOVE?  YES  NO

Please check  appropriate class: (121000-01)  Grades 5 & 6: 8:15 a.m. - 9:45 a.m. Monday - Thursday  
 (Grade in fall 2010) (121000-02)  Grades 3 & 4: 10:00 a.m. - 11:00 a.m. Monday - Thursday  
 (121000-03)  Grades 7 & 8: 11:30 a.m. - 1:00 p.m. Monday - Thursday  
 (121000-04)  Grade 9: 1:15 - 2:30 p.m. Monday - Thursday

I give permission for my, above named, son to participate in the Boys Summer Basketball Program, and also give permission for him to travel on the bus to away games.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

PARENT/GUARDIAN NAME(S) Please Print \_\_\_\_\_