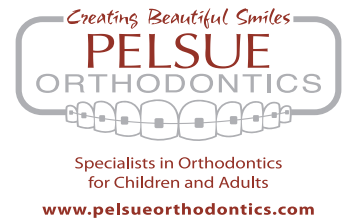




AGES 4 - 6 COED MIGHTY MITE BASKETBALL



GENERAL INFORMATION:

- This program is designed for boys and girls ages 4 to 6.
- Practices & Games will be held at the Janesville YMCA.
- 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. All practices/games are on Saturdays.
- 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.
- **Parents will be contacted soon after the coaches meeting regarding their first practice.**

Early Registration: November 6 - December 22
Late Registration (\$10 T-shirt): December 23-30
Practices Begin: Week of January 13
First Game: January 27
Last Game: February 24
Registration Fee:
 (T-shirt included with early registration fee)
\$32 Member / \$62 Non-member

Scholarships and financial aid are available.
 Refunds/Cancellations: Refund or credit issued only if YMCA cancels program.

For more information contact Trent Henning at 754-9622 ext. 114 thenning@ymcajanesville.org

YMCA OF NORTHERN ROCK COUNTY

Downtown Janesville - 608.754.YMCA - 221 Dodge St. Janesville, WI 53548
 Parker - 608.868.YMCA - 1360 Parkview Dr. Milton, WI 53563
www.ymcajanesville.org

Winter Mighty Mite In-House Basketball Registration Form—One Form Per Person Register by mail, in person or fax credit card information to 608-754-9024 attention Trent Henning.

Child's Name: _____ M / F Age: _____ Birth Date _____
 Contact's Name: _____ Contact Phone Number: _____
 Address: _____ City: _____ State: ____ Zip: _____
 Email Address: _____ Member Non-Member
 School Attending: _____ **SHIRT SIZE: 3T 4T Child S Child M Child L**

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: _____

I WOULD LIKE TO BE A SPONSOR: _____



Payment Method

- Cash (in person only)
- Check # _____
- Credit Card Visa Master Card

*Refunds may only be issued if the YMCA cancels a program

Name on Card _____
 Card # _____
 Expiration Date _____
 3-Digit Verification Code (on back of card) _____
 Signature _____
AMOUNT ENCLOSED _____