



# K-1<sup>st</sup> BASKETBALL

Littlefork CERC

**COACH:** Kristi Benedict

**DATES:** Saturdays PRACTICES | January 4<sup>th</sup>, January 11<sup>th</sup>, January 25<sup>th</sup>  
February 1<sup>st</sup>, February 8<sup>th</sup>, \*February 22<sup>nd</sup> (This end date is tentative)

**TIME:** 9am-10am

**LOCATION:** Littlefork New Gym

**AGES:** Kindergarten & 1<sup>st</sup> Grade

**TEAM REACH GROUP  
CODE:  
CERCK3BB25**

**Registration Fee:**  
\$30  
**Checks are payable to:**  
Littlefork CERC



## BASKETBALL K-1<sup>ST</sup> GRADE REGISTRATION FORM

**Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Parent/Guardian:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Emergency Contact & Phone Number:** \_\_\_\_\_

**Who will be picking up your child?** \_\_\_\_\_

**Does your child have any medical/allergies?** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>Children Shirt Size</b> circle one:			
XSMALL	SMALL	MEDIUM	LARGE
<b>Adult Shirt Size</b> circle one:			
SMALL	MEDIUM	LARGE	

**Team Pictures will be taken. Please read the consent form below regarding pictures:**

I understand and hereby give permission for my child to participate in team photos and other photos taken by a professional photographer, coach or CERC director. I understand that sport pictures may be used for, but not limited to social media, newspaper, and/or advertisement.

I have read and consent to the above paragraph regarding my child.

Parent/Guardian Signature: \_\_\_\_\_

**WHAT IS THE BEST WAY TO COMMUNICATE WITH YOU**

TEAM REACH

EMAIL (IF YOU CHECK, MAKE SURE YOU PROVIDE YOUR EMAIL ABOVE)

PAPER SENT HOME

FACEBOOK

PHONE

**Please register your child for Basketball by the end of the day on December 31st, 2024.  
Payment must be included with the registration form.**

Any questions please contact Tiffany Dobbs, CERC Director at [cerc@littleforkmn.gov](mailto:cerc@littleforkmn.gov) |218-278-4422