

2025 YOUTH BASKETBALL PROGRAM

The Youth Basketball program is sponsored by the Limon Recreation Department and will begin on **January 17, 2025** and end on **February 14, 2025**. The program will be for boys and girls in grades 2nd through 6th. We will be practicing on Friday mornings **January 17th, 24th, and 31st and February 7th, 14th**. We will be practicing in the Limon Public Schools Activities Building. We will be practicing from 9:00-10:15am for boys and girls 2nd – 6th grade. Participants will be working on fundamentals, running through drills, playing 3-on-3 and competing in fun games and contests.

There will be a **\$25.00 fee** for those participating in the program. Payment should be made to the Limon Recreation Department and attached to the release form below and returned to Limon town hall or the school by **January 10, 2025**. **Traveling players will not be charged a fee and will not receive a T-shirt but, still need to fill out a form.** No one will be allowed to play without this permission slip. Upon payment of the fee, each participant will receive a Limon Basketball T-shirt to keep. Each participant must have **CLEAN GYM SHOES** that have not been worn outside, to participate.

If you have any questions about this program please feel free to contact me anytime. Check the Town of Limon Facebook for updates.

Jason Bandy
Limon Recreation Department
719-775-2346

Liability Release Form

I hereby certify that my child, _____ has permission to participate in the recreation activity, Youth Basketball Program, sponsored by the Limon Recreation Department. I realize there is some risk of injury while being involved in this program, and I will not hold the Town of Limon or any of their agents or volunteers liable for such injury. Any emergency medical attention the supervisor of this activity deems necessary may be given by a competent provider, if the guardian listed below cannot be contacted immediately.

Participant's Name: _____ D.O.B. _____ Grade: _____

Parent or Guardian's Signature: _____ Date: _____

Home Phone: _____ Work Phone: _____ Cell: _____

Email Address: _____

Physical Address: _____

Please Circle T-shirt size: YS YM YL AS AM AL

Travel Player: Yes ___ or No ___