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www.danversrec.com
 Sign up early and save!

DANVERS RECREATION
SHOOTING STARS GIRLS BASKETBALL
 Directed by John Jaworski

Registrations are always accepted at the Danvers Recreation Office in Town Hall 1 Sylvan St. and by mail. **Please register before November 19th.**

Shooting Stars Girls Basketball for Grades 3, 4 and 5:

This is an instructional/recreational basketball program. **Clinics and Games** will be held on Saturdays. **Practices** will be announced by the coach and will take place on Monday, Tuesday, or Wednesday evenings at Great Oak School beginning in January.

**Pre-Program Clinic
 & Evaluation
 Saturday, Nov. 19th
 9-10am Grade 3
 10-11am Grade 4
 Holten-Richmond Gym**

Program runs December 3, 2011 - March 10, 2012

**Begins Saturday, December 3RD
 3rd Grade program runs 8:30-10AM
 4th and 5th* Grade program runs 10-11:30AM
 All take place at the Holten-Richmond Gym**

*Times are subject to change depending on numbers.

**Program Cost: \$79.00 on or before November 19th, \$89 after November 19th.
 For cancellations throughout the season please check www.danversrec.com.
Check our online calendar for information.**

COACHES WANTED!!!!

Danvers Recreation is looking for coaches and assistant coaches for ALL youth basketball programs, **with or without** experience. All interested coaches must fill out a coaching application and C.O.R.I. Form which will be available on our website, www.danversrec.com.

Danvers Recreation Girls Shooting Stars Basketball 2011-2012

Name: _____ Grade: _____

Address: _____ Phone: _____

Email Address: _____

Emergency contact name and phone number: _____

____ Yes, I am interested in assisting as a coach. Name _____

I hold harmless the Town of Danvers, its employees, volunteers, or its agents from any and all injuries that might be sustained by the participant during the program. In the event of injury, I grant permission to provide/acquire medical care or assistance. In addition, I give permission for any photographs taken of my child to be used for publicity purposes.

Signature of parent/guardian: _____ Date: _____

TOTAL PAYMENT _____ CHECK# _____ MC/VISA _____ Exp. _____