

# 2020-21 Community Education Basketball Kindergarten thru 6th Grade Boys & Girls



Community Education will be sponsoring the elementary basketball program for girls and boys in Kindergarten through 6th grade. This program is designed to be a fun learning experience for everyone involved. Students will work on learning the fundamentals of basketball including shooting, dribbling, defense, ball handling and team work. Please register by Thursday, February 11 by 4:00 p.m. Girls and boys will meet on alternating weekends. We are working on keeping the groups smaller due to COVID regulations.

## Practice Information

**Days:** All groups will meet on Saturday's  
**Girls:** Feb. 13, 27, Mar. 13  
**Boys:** Feb. 20, Mar. 6, 20  
**Fee:** \$20 each group  
**Location:** Elementary Gym– use door #4 (behind the elementary school)  
**T-Shirt:** All participants will receive a t-shirt. Please mark a shirt size when you register.

**2nd Grade Time:** 9:00-9:45 am  
**1st Grade Time:** 10:00-10:45 am  
**Kindergarten Time:** 11:00-11:45 am  
**3rd & 4th grade Time:** 12 to 1:00 pm  
**5th & 6th Grade Time:** 1:15 to 2:15 pm

\*Practices might be changed due to unforeseen activities or if numbers are small in one group, we might combine groups together.

## Fee & Registration

Register and pay online at <https://www.locallevelvents.com/events/org/barnesville-schools> Please register online if possible. If you register with paper registration it can be done as follows:

- 1) Brought into the Community Education Office located in the High School: 302 3rd St SE
- 2) Sent to school in an envelope labeled Community Education for your child to give to their teacher or drop in the Elementary Office
- 3) Fax the form to the office at 218-354-7260 & send the fee or pay at payschools
- 4) Email the form back to me at [cellefson@barnesville.k12.mn.us](mailto:cellefson@barnesville.k12.mn.us) & send the fee or us payschools

Please register by Thursday, February 11th no later than 4:00 pm

### COVID Regulations:

- Students must wear a mask anytime they are in the building for basketball
- Student must bring their own water bottle
- Parents cannot come to basketball and watch
- Students should be dropped off at door #4 at the elementary school and walk to the gym
- Students will not be running around the building
- When students leave they will need to get their coats on and meet their parent at the door #4

## Questions

Please call the Community Education Office at 354-2638 with any questions about the registration form.

## Bad Weather

If the weather is bad on Saturdays, we will get an announcement out using Instant Alert. All weather cancellations will be done through Instant Alert.

Please Print Clearly

## 2020-21 Basketball Registration Form & Release of Liability Waiver Community Education Boys & Girls Kindergarten thru 6th grade Basketball

Student's Name(1st & Last) \_\_\_\_\_ Circle: Girl or Boy  
Student Grade K, 1, 2, 3, 4, 5, 6 (circle) Parent/Guardian Name (1st & Last) \_\_\_\_\_  
Telephone No. (Home/cell) \_\_\_\_\_ (Cell phone of one parent) \_\_\_\_\_  
Parent Email address \_\_\_\_\_  
Circle For T-Shirt Size YS 6-8 YM10-12 YL14-16 ASM AM ALG AXL

### **READ BEFORE SIGNING**

In consideration of being allowed to participate in any way in ISD #146 and Barnesville Community Education Elementary Basketball the undersigned acknowledges, appreciates, and agrees that:

The risks of injury and illness (ex: communicable diseases such as MRSA, influenza, and COVID-19) from the activities involved in this program are significant, potentially life-threatening, and while particular rules, equipment, and personal discipline may reduce these risks, the risks of serious injury and illness do exist; and, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,

I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,

I acknowledge that I am aware that there are risks to me of exposure to directly or indirectly arising out of, contributed to, by, or resulting from:

An outbreak of any and all communicable disease, including but not limited to, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof;

In consideration of having the opportunity to participate as either a team member or competitor at location, and in acknowledging that I am aware of and willing to assume the risks associated with this activity, I hereby voluntarily agree to waive, hold harmless and indemnify Barnesville Community Education and ISD #146 and its trustees, agents, volunteers and employees from any and all claims, demands, damages and causes of action of any nature whatsoever arising out of ordinary negligence which I, my heirs, my assigns or successors may have against them for, on account of, or by reason of my participation in the above activities. I indicate my agreement to this hold harmless elective noted below.

### FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of the activity and his/her responsibilities for adhering to the rules and regulations. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releases and myself, my spouse, and child/ward to release and agree to indemnify and hold harmless the Releases from any and all liabilities incident to my minor child's/ward's involvement or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law. I also authorize emergency medical treatment of the student by qualified medical and emergency personnel if needed.

Parent/Guardian signature: \_\_\_\_\_  
Date Signed \_\_\_\_\_ Emergency Phone Number (\_\_\_\_) \_\_\_\_\_

**ONLINE FORM OR THIS PAPER FORM MUST BE RETURNED BEFORE STARTING BASKETBALL**

**\*fill out electronically or sign and return this form to the Community Education office**