

City of Dover Parks & Recreation

Youth Summer Basketball League

for youth born in 2006 - 2014



The ever popular co-ed summer youth basketball league is right around the corner! We recommend early registration as this league has a limited registration maximum and usually fills up quickly. Skill evaluations will be conducted on May 30. Skill evaluations are used solely as an attempt to balance teams. **League is limited to the first 36 registrations per age division.** In games, all players participate with mandatory playing time requirements. All practice sessions and games will be held at the **John W. Pitts Recreation Center**. Team assignment and schedules will be posted online. **Activity Fee: \$50**

Skills Evaluation - May 30

League dates: Begin late June

One weeknight practice

Games on Saturdays



Divisions by Ages

Pee Wee Division	Youth born in 2013 - 2014
Bantam Division	Youth born in 2011 - 2012
Intermediate Division	Youth born in 2009 - 2010
Junior Division	Youth born in 2006 - 2008

Skills Evaluation Schedule on May 30

Pee Wee Division	No Tryout
Bantam Division	9:00-9:50 am
Intermediate Division	10:00-10:50 am
Junior Division	11:00-11:50 am

Important Information

Skills Evaluation: May 30

Rosters, practice times and game schedules will be posted on our website: <http://www.cityofdover.com/Basketball-Leagues/>



Volunteer Coaches are needed for our Youth Basketball League.

If interested, please call Steve Pickering, Sports Coordinator, at 302-736-7095. All coaches are required to go through a background check.

REGISTER ONLINE AT:

<https://cityofdover.recdesk.com/Community/Home>

Or mail completed form & check to : City of Dover Parks & Recreation, 10 Electric Ave, Dover, DE 19904

City of Dover Parks & Recreation

Registration Form

PLEASE PRINT AND FILL OUT COMPLETELY and RETURN

CITY OF DOVER RESIDENT - YES ☐ NO ☐

Parent / Legal Guardian

Adult First Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (home) _____ (work) _____ (other) _____

Email: _____ DOB: _____

<u>Participants Name</u>			Age	D.O.B.	Activity Session #	Activity Fee
<i>First Name</i>	<i>M.I.</i>	<i>Last Name</i>				
					Yth BBall League	\$50
Total Enclosed						

RELEASE STATEMENT:

I understand that the City of Dover provides no medical coverage for participants unless specified, and that all bills which may be incurred as a result of an activity-related injury are my responsibility. I hold harmless the City of Dover and all other parties involved in the conduction of these activities. I agree that any photographs/videos taken during the event shall become and remain the property of the City of Dover, and that the City of Dover shall have the right to use such photographs and/or films whenever so desired free of any claims on my behalf.

Signature of parent/legal guardian

Date

Early registration is recommended as our programs have registration minimum and maximum participant stipulations. Be sure to register early to ensure your child's space in our programs!