

Springfield Elementary Basketball Registration

The Springfield Public Schools community education program will coordinate elementary team basketball programs for grades 4-6 this year. This program is an extension of the after-school skills clinic that will also be offered after the holidays. Your son/daughter has already expressed interest in playing on their grade-level team by signing up on a list provided at school. The cost for participation will be \$50.00 (checks payable to Springfield Public Schools). These fees will be used to purchase equipment and uniforms, pay tournament entry fees, and provide a nominal stipend to coaches.

Practice schedules are being developed now, but we anticipate each team holding 1-2 practices per week following the holiday break. Coaches will be responsible for coordinating scrimmages with neighboring communities and registering for weekend tournaments. The number of games and tournaments being scheduled will vary by grade-level as coaches determine skill levels and readiness. We anticipate scheduling practices on either Tuesday or Thursday nights and Saturday mornings during the months of January, February, and March.

Please direct all questions regarding elementary team basketball to either Roseanne Kaseforth or Paul Arnoldi at the contacts provided below. **When the registration process is complete, further details on coaches, rosters, practices, tournaments, and other general program expectations will be communicated with families.** We look forward to a great season and thank you for allowing your child to participate in this program.

Sincerely,

Paul Arnoldi
507-723-4288
Paul.arnoldi@springfield.mntm.org

Roseanne Kaseforth
507-723-4283
Roseanne.kaseforth@springfield.mntm.org



****Please detach and return the bottom form and fee to the elementary office by Friday, January 15th***

Student Name: _____ Grade Level: _____

Parent Names: _____

Phone Numbers (list all): _____

Email Addresses (list all): _____

Interest in Assisting/Volunteering (yes/no): _____ Volunteer Capacity (coach/referee/scoreboard/concessions): _____

**All coaches and volunteer assistants must have a current background check on file with Springfield Public Schools.*

I give my child permission to play basketball for the Springfield Elementary Program and do have adequate insurance coverage for him/her in case of injury. I will not hold any coach or school liable for any injuries sustained during practice or games.

Parent Signatures

Date