

St. Benedict Bitty Basketball Program



Who: St. Benedict students (pre-K thru 3rd grade), parents & volunteer coaches.

What: St. Benedict Bitty Basketball League is a non-competitive basketball league created to help your child learn the game of basketball, stay active and have fun with their classmates outside of the classroom.

When: Practice/Games (approx. 1 hour) on Saturdays scheduled between 9:00AM – 3:00PM
Schedule: Jan 15th through Mar 5th; No games Saturday, Feb 12th
Trophy Day & Pizza Party scheduled for Saturday, Mar 12th

Players are separated into 2 leagues by grade: Pre-K & Kindergarten are in the Beginner's League and 1st – 3rd grade are in the Advanced League.

Registration fee for first child per family is \$40 with each additional child \$25. **Each player must have a reversible jersey that may be purchased at an additional cost of \$15 each.** This jersey may be used as long as your child (and younger siblings) can fit into it for future leagues.

By registering your child(ren) in the Bitty Basketball Program you agree to have a parent, legal guardian or assigned adult accompany your child(ren) during play times.

Please provide an e-mail address where all further bitty basketball correspondence/schedules/alerts will be sent.

Return the completed registration form and payment (for both the session fee and jersey fee) to the attention of Chris Deakins, Athletic Department by Tuesday, December 21st. Late registration can be difficult to accommodate.

If you have any questions please contact: Erik Petersen, Parent Volunteer @ 773-463-4833 or epetersen72@gmail.com
Chris Deakins, Athletic Director @ 773-463-6797 or cdeakins@stbenedict.com

St. Benedict Bitty Basketball Registration Form (2011 Winter Session)

(Fee & Jersey; circle all that apply)

Child's Name: _____	Age: _____	Grade: _____	Jersey Size*: _____	\$40	\$15
Child's Name: _____	Age: _____	Grade: _____	Jersey Size*: _____	\$25	\$15
Child's Name: _____	Age: _____	Grade: _____	Jersey Size*: _____	\$25	\$15

*Jerseys are available in children sizes: extra small, small, medium, large.

Total: \$ _____

Parents/Guardians Name: _____

Email Address: _____

Home Phone: _____ Work/Cell Phone: _____

*****The success of this program depends entirely on parental support. Each team will need 3-5 coaches. Please note your interest to coach.*****

Yes, I would like to coach (name/e-mail if different than above): _____