



Prairie du Chien Parks and Recreation Department  
& PCA Patriot Basketball Team

# Youth Basketball

Open to Boys and Girls 1st - 4th Grades

PLEASE NOTE:  
FIRST SCHEDULED PRACTICE  
NIGHT PARENTS MUST BE  
IN ATTENDANCE.

Co-Sponsored  
by



**Join the in-house youth hoops program with emphasis on participation, learning basics, and most importantly having fun!**

**\*Note: Practice dates might change due to high school game scheduling!**

**All 3rd & 4th Grade** practices will be on Monday and Thursdays on the following dates: November 13, 16, 20, 27, 30, December 4, 7, 11, 14, 18, 21, 28

3rd & 4th Grades (Boys practice Mondays 6 - 7 p.m. and Thursdays 7 - 8 p.m.)  
(Girls practice Mondays 7 - 8 p.m. and Thursdays 6 - 7 p.m.)

**All 1st & 2nd Grade** practices will be on Wednesdays from 5 - 6 p.m.  
on the following dates: November 15, 22, 29, December 6, 13, 20, 27

**Saturday game dates for both Boys & Girls at Hoffman Hall:**

December 2, 9, 16, 23, 30

Program fee: PDC Resident \$20.00/Non-Resident \$30.00. Payable to City of Prairie du Chien.

For additional information please call (608) 326-7207. Deadline November 8.

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## Activity Registration Form

**Send to City of Prairie du Chien, 214 E. Blackhawk Street or drop off  
to Prairie du Chien City Hall or online at <http://pdc.recdesk.com/recdeskportal>  
Must pre-register by November 8th.**

Participant \_\_\_\_\_

Address \_\_\_\_\_

Age: Male \_\_\_\_\_ Female \_\_\_\_\_ Grade \_\_\_\_\_ Phone \_\_\_\_\_

Name of Program: \_\_\_\_\_ Site \_\_\_\_\_

T-shirt size (circle) YS YM YL AS AM AL

I hereby understand that to participate in the above stated program like most programs similar it may have some inherent degree of risk involved. Participants must assume full responsibility for personnel injury incurred while taking part in the activities. No accident insurance is provided through the city of Prairie du Chien. Please list any special considerations we should be informed of (medicines, disabilities, etc.)

☐ Please check box if you are interested in instructing part-time.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please inform us of any allergic or health issues \_\_\_\_\_