



## LITTLE VIKING HOOPERS

**Little Viking Hoopers** is a month-long developmental basketball league for current St. Anne-Pacelli students in grades 3-5. The goal of the program is to teach basic fundamentals, game play rules and encourage a competitive spirit. Students will sign up to play and then be divided into teams. The program costs \$60 per student. This fee includes a t-shirt for each participant. Practices will be held in the St. Anne-Pacelli gym from 3:30 until 4:30 p.m. on Wednesdays, March 7, 14, 21 and games will be played in St. Anne-Pacelli's gym on Saturday mornings at 10 a.m. on March 10, 17 and 24. The Little Viking Hoopers' point of contact is Loretta Person: lperson@sasphs.net.

*\*Note: Participants will report to Extended Day after school and then be picked up by coaches and taken to the gym for practices. There will not be an additional fee for this service.*

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Player's Name/Grade \_\_\_\_\_ T-shirt size: YS YM YL YXL AS

Parent's name \_\_\_\_\_ Parent's Cell \_\_\_\_\_

Parent's email \_\_\_\_\_

Emergency point of contact name \_\_\_\_\_ Cell \_\_\_\_\_

Payment Cash \_\_\_\_\_ Check# \_\_\_\_\_ (make checks payable to St. Anne-Pacelli Catholic School)

Waiver/Release Statement (please read and sign below): In consideration of acceptance of this entry, I hereby, for myself, my heirs, my executors, and administrators, waive any and all rights and claims for illness, injuries, or damages I may have against St. Anne-Pacelli School or their officers, directors, and members, volunteers, employees, agents, sponsors or race director. None of the above is responsible for loss of personal items, or any form of aggravation in connection with said event. I fully understand that my participation is a completely voluntary undertaking of my own choosing and I fully understand that in doing so I assume full responsibility for all damages or injuries incurred by me in connections with this event. I give permission for the free use of my name or photograph in any broadcast or print account of this event. I am in proper physical condition to participate in this event. I certify that I carefully read this release and know the contents.

Parent/guardian signature: \_\_\_\_\_

Return completed & signed entry form with payment by March 2, 2018 to St. Anne-Pacelli Catholic School's main office.