



Parks and Recreation Department  
1100 Chatham Av Norwalk, IA 50211 515.981.9206



## Adult Basketball Pick-up Games

*PRE-REGISTRATION REQUIRED*

(Register online @ [www.norwalk.iowa.gov](http://www.norwalk.iowa.gov), Parks and Recreation office, or by mail)

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Pick-up basketball games will be offered at the Norwalk Middle School gym for adults (must be 18 years old and out of high school.) Please bring clean tennis shoes to wear for the games. This program is for those who live in the Norwalk School District.

### Dates

Registration Dates: Begins Sept 19 (closes when full)

Program Dates: Oct 5, 12, 19, 26  
Nov 2\*, 9, 16, 23\*, 30  
Dec 7, 14, 21  
Jan 4, 11, 18, 25  
Feb 1, 8, 15\*, 22  
Mar 1, 8, 15\*, 22

\*No school; possibility no open gym

Program Times: 7:00 to 9:00 pm



### Information

Cost: \$32.10 Norwalk resident/\$36.92 non-resident (includes sales tax)

Location: Norwalk Middle School Gym

Maximum number of participants: 40

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TURN OVER TO FILL OUT REGISTRATION INFORMATION

# Norwalk Parks and Recreation Registration Form

## Individual Information:

Name:

Address:

City, State, Zip:

Daytime Phone #:  Type:

Evening Phone #:  Type:

Cell Phone #:  Preference:

Email Address

## Contact Information:

Contact

Phone

## Activity Information:

Program  Registration Fee  Late Fee

## Financial Assistance Donation:

Most programs are intended to open up participation opportunities for Norwalk area children by reducing financial obstacles for those who may not be participating because they cannot afford to pay the registration fees.

Would you like to contribute \$1.00 (or more) to this program? Yes \_\_\_\_\_ No Thank You  
*(if yes, please add your donation to the registration fee - and THANK YOU!)*

## Additional Comments/Medical conditions (if any):

## Liability Wavier:

I agree not to hold the Norwalk Parks and Recreation Department, their staff, or any volunteer helpers responsible for any accidents. I have READ and AGREE to the waiver.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR OFFICE USE ONLY: 440.4500/2.4561 30+2.10/34.50+2.42

PAID \_\_\_\_\_ CK# \_\_\_\_\_ CASH \_\_\_\_\_ By: \_\_\_\_\_  
Credit Card \_\_\_\_\_ Number \_\_\_\_\_ Expires \_\_\_\_\_