

Louisburg Parks and Recreation Department

Our Mission Statement

The Louisburg Parks and Recreation Department strives to be the leader in Franklin County by offering high quality recreational, cultural and leisure opportunities that will promote positive development and growth for Louisburg citizens and visitors alike. It is our mission to provide parks and recreation facilities that will meet the needs of our citizenry, preserve our natural resources and protect the historical integrity of our community for generations to come.

Email pbsaunders@msn.com

TOWN HALL HOURS

Monday - Friday
8:30 am - 5:00 pm

Mailing Address:

110 West Nash St.
Louisburg, NC 27549

STAFF

Kim Saunders –*Athletics Program Supervisor*
Colton Young –*Athletics and Parks Facility Supervisor*

Visit us at our website
www.townoflouisburg.com

Or

Find us on Facebook

Town of Louisburg



LOUISBURG

Charming Since 1779

Parks & Recreation



Winter 2018-19

Basketball Registration

Deadline
November 1st

LOUISBURG PARKS & RECREATION DEPARTMENT FALL ATHLETICS REGISTRATION FORM

Basketball

Participant's Name _____ Age _____ Birth Date _____

Parent(s)/Guardian(s) _____ Boy Girl

Address _____ City _____ Zip _____

Home Phone _____ Mother's Cell _____ Fathers's Cell _____

Mother's Email _____ Father's Email _____

Are you interested in being an head coach? _____ An assistant Coach? _____

Please put your childs uniform size

T-Shirt Size Youth: _____ Adult: _____

If Coaching, T-Shirt Size Adult: _____

DID YOUR CHILD PLAY THIS SPORT IN LOUISBURG LAST YEAR? _____

GIVE NAME OF BROTHER(S) / SISTER(S) PLAYING IN THE SAME AGE GROUP _____

Knowing the physical and health condition of my child, I give my approval of their participation in the Louisburg Parks and Recreation Department's youth Baseball & Softball program. I hereby assume all risks and hazards incidental to the conduct of the activities and transportation to and from such events. I understand that individual accident insurance is required by the Louisburg Parks and Recreation Department and certify that my child is covered as indicated below. I also understand and agree to assume full responsibility for the uniform issued to my child. Additionally, I give the Louisburg Parks and Recreation Department permission to take my photo or my child's photo for marketing and/or promotional purposes.

Parent Signature

Date

RECREATION OFFICE USE ONLY

Date Registered ___/___/18 Fees Paid: \$ _____ Received By: _____

Cash Check Check # _____ Receipt # _____ Amount Due _____

WINTER ATHLETICS

Registration Dates:

Deadline: Thursday, November 1st, 2018
Walk in's will be accepted Monday through
Friday from 8:30am-5pm in the Louisburg
Town Hall (110 West Nash St.)

Co-ed Basketball

Age cut-off as of 1/1/19

Ages 4-14

Fees: Resident Non-Resident

\$25.00 \$70.00

LATE FEE:

**A \$10.00 Late Fee will be applied
to any payment after the
Registration Deadline**

***Resident is defined as one who lives inside the
Incorporated city limits and pays taxes to the
Town of Louisburg.**

Refund Policy

There will be no refunds made, however
credit may be applied for future programs.