## FRIDAY SEPTEMBER 22ND EARLY RELEASE 12:00 DISMISSAL

## PLEASE NOTIFY THE OFFICE OF ANY PICK UP CHANGES.

## 2023 Kimberly Girls Volleyball



## **YOUTH NIGHT**

## <u>Calling ALL grades PreK-8th</u> Thursday, October 12th vs. Appleton East

Wear your 2023 summer camp t-shirt for FREE ADMISSION into the JV/Varsity game! JV begins at 5:30pm with Varsity following at 7pm.

Our Influential Educators will be recognized between the JV and Varsity Games.

# TRY HOCKEY FOR FREE Presented By:

TRI-COUNTY ICE ARENA OCTOBER 2......3:00-4:30PM

APPLETON FAMILY ICE CENTER OCTOBER 16......3:00-4:30PM

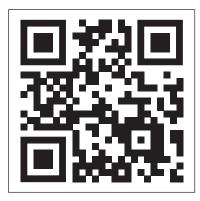
### TRI-COUNTY ICE ARENA NOVEMBER 6.....4:00-6:00PM

Get padded up and join us on the ice to try hockey for a day. Never skated? No worries, we will teach you! (Equipment is provided, REGISTRATION IS REQUIRED)

SEE DETAILS AND REGISTER ONLINE AT WWW.APPLETONICE.ORG/TRY-HOCKEY

FREE KIDS ACTIVITY RECOMMENDED FOR AGES 4-9

(REGISTRATION IS REQUIRED, SPACE IS LIMITED)











CONNECT WITH US ON FACEBOOK FOR MORE INFORMATION **f** @appletonscheels

### Kimberly Area Youth Basketball Club 2023-2024



Registration OPENS September 1!

## To Register: Please visit our website www.kaybc.com to register and for additional information. To receive early bird pricing, players must complete the online registration by <u>Sunday</u> <u>September 17<sup>th</sup>.</u>

**QUESTIONS?** Email us at kaybc1999@gmail.com

### Parent Meetings will be held in the JRG Auditorium. Attendance is highly encouraged!

| Who   | Date                       | Time     |  |  |
|---|----------------------------|----------|--|--|
| Girls 3 <sup>rd</sup> - 4 <sup>th</sup> Grade |                            | 6 - 7 pm |  |  |
| Girls 5 <sup>th</sup> - 6 <sup>th</sup> Grade | September 12 <sup>th</sup> | 7 - 8 pm |  |  |
| Girls 7 <sup>th</sup> - 8 <sup>th</sup> Grade |                            | 8 - 9 pm |  |  |
| Boys 3 <sup>rd</sup> - 4 <sup>th</sup> Grade  |                            | 6 - 7 pm |  |  |
| Boys 5 <sup>th</sup> - 6 <sup>th</sup> Grade  | September 13 <sup>th</sup> | 7 - 8 pm |  |  |
| Boys 7 <sup>th</sup> - 8 <sup>th</sup> Grade  |                            | 8 - 9 pm |  |  |

**Grade Assessments for the Heart of the Valley League (HOV)** will be held at JRG. Spectators will not be permitted to assessments.

| Who                          | Date                       | Time  |  |  |
|------------------------------|----------------------------|---|--|--|
| Girls 3 <sup>rd</sup> Grade  |                            | 11 am - noon<br>10 am – 11 am<br>9 am – 10 am |  |  |
| Girls 4 <sup>th</sup> Grade  | September 23 <sup>rd</sup> |   |  |  |
| Girls 5 <sup>th</sup> Grade* |                            |   |  |  |
| Girls 6 <sup>th</sup> Grade* |                            | 8 am – 9 am                                   |  |  |
| Boys 3 <sup>rd</sup> Grade   |                            | 11 am - noon                                  |  |  |
| Boys 4 <sup>th</sup> Grade   | September 24 <sup>th</sup> | 10 am – 11 am                                 |  |  |
| Boys 5 <sup>th</sup> Grade*  |                            | 9 am – 10 am                                  |  |  |
| Boys 6 <sup>th</sup> Grade*  |                            | 8 am – 9 am                                   |  |  |

\*State Team assessments/tryouts will be held after HOV completes (around mid-December)

**Grade Tryouts (7<sup>th</sup> - 8<sup>th</sup>)** will be held at JRG or KHS. Spectators will not be permitted to assessments. All 7<sup>th</sup> and 8<sup>th</sup> grade players must try out for/play JRG school ball to be eligible to play for KAYBC. If you try out for school ball and do not make the JRG team, you are still eligible to try out for KAYBC.

| Who  | Date                                     | Time                     |  |  |  |  |
|--|--|--------------------------|--|--|--|--|
| Girls 7 <sup>th</sup> Grade                    | September 20; September 25 <sup>th</sup> | 6 – 7 pm; 7-8 pm         |  |  |  |  |
| Girls 8 <sup>th</sup> Grade                    | September 20; September 25 <sup>th</sup> | 7 – 8 pm; 8-9 pm         |  |  |  |  |
| Boys 7 <sup>th</sup> and 8 <sup>th</sup> Grade | October 15; October 17th                 | 6:00 – 7:30 pm; 8 – 9 pm |  |  |  |  |
| Girls at JRG Boys at KHS                       |  |                          |  |  |  |  |

**Skills and Drills (6 sessions)** will be held at Woodland School. The skills and drills program is for Girls in 1<sup>st</sup> and 2<sup>nd</sup> grade and for Boys Grade K-2.

Dates: 12/9, 12/16, 1/13, 1/20, 1/27, 2/3 Times: Girls 8 – 9 am, Boys (grade K & 1<sup>st</sup>) 9:15 – 10:15 am, Boys (grade 2) 10:30 – 11:30 am

# LET'S CELEBRATE KIMBERLY Homecoming

## SEPTEMBER 25-29

# **MONDAY - CRAZY SOCK DAY**



# TUESDAY - CLASS COLOR DAY

5K - Yellow 1st grade - Green 2nd grade - Orange 3rd grade - Blue 4th grade - Red

# **WEDNESDAY - JANSSEN**

BLUE DAY



# THURSDAY - JERSEY DAY



FRIDAY - WEAR RED & WHITE OR KIMBERLY GEAR





What do Cub Scouts Do?

Point your phone camera here, to find out!



## Boys & Girls Grades K-5: Join the Fun of Cub Scouts!

## Kick off to Scouting Event with Pack 3039!

 When: Thursday, September 21st, 2023 6:00-7:00pm
 Where: Janssen Elementary, 420 Wallace St, Combined Locks Scouting Values, Building Character, Community Service, Family Camping & Fun Outings are just a few things we do!
 Come find out more about the fun of Cub Scouts and enjoy an ice cream party on our Join Night event!
 For more Information, contact Jody Rasmussen at kimberlypack3039@gmail.com or 920-227-8016. https://beascout.scouting.org/ To Join Pack 3039, scan the QR code below!



The annual National registration fee is non-refundable. Financial Assistance is available.

#### YOUTH INFORMATION

### **BSA YOUTH MEMBER APPLICATION**

| First name (Full legal name)   | Middle name                  | Last name                |  |                                | Suffix               | Preferred nickname       |  |  |
|--|------------------------------|--------------------------|--|--------------------------------|----------------------|--------------------------|--|--|
|  |                              |                          |  |                                |                      |                          |  |  |
| Country Mailing address  | City                         |                          |  |                                | Stat                 | te Zip code              |  |  |
| USA  |                              |                          |  |                                |                      |                          |  |  |
| Phone Date   | of birth (mm/dd/yyyy)        | Grade Ethnic             | background:  |                                |                      | Gender:                  |  |  |
|  |                              |                          | -  |                                |                      | OMale OFemale            |  |  |
| School   |                              |                          | k/African American   |                                | Alaska Native        |                          |  |  |
|  |                              |                          | casian/White<br>banic/Latino   | OPacific Islander OA<br>OOther | Asian                |                          |  |  |
|  |                              |                          | Junio Latino   | Coller                         |                      | OScout Life subscription |  |  |
| PARENT/LEGAL GUARDIAN INFORMATION  |                              |                          |  |                                |                      |                          |  |  |
|  |                              | here if the Lion or Tige | adult partner is not li  | ving at the same address and   | d complete and attai | ch an adult application. |  |  |
| Select relationship: OParent OLegal Guardian OGr   | andparent OOther (specify)   |                          |  |                                |                      |                          |  |  |
| First name (Full legal name)   | Middle name                  | Last name                |  |                                | Suffix               | Preferred nickname       |  |  |
|  |                              |                          |  |                                |                      |                          |  |  |
| Country Mailing address  | City                         |                          |  |                                | State                | e Zip code               |  |  |
| USA  |                              |                          |  |                                |                      |                          |  |  |
| Primary phone Date   | of birth (mm/dd/yyyy)        | Occupation               |  | Employer                       |                      | Gender:                  |  |  |
|  |                              |                          |  |                                | TTTT                 |                          |  |  |
| Alternate phone Ext.   | Previous Scouting experie    |                          |  |                                |                      |                          |  |  |
|  |                              |                          |  |                                |                      |                          |  |  |
| I have read the attached information for parents and approve   |                              |                          |  |                                |                      |                          |  |  |
| application. I affirm that I have or will review How to Protect  | Your                         |                          |  |                                |                      |                          |  |  |
| Children From Child Abuse: A Parent's Guide.   |                              |                          | arent/legal guardian   | email address                  |                      |                          |  |  |
|  |                              |                          |  |                                |                      |                          |  |  |
| Signature of parent/legal guardian   | Date                         |                          |  |                                |                      |                          |  |  |
|  | To be con                    | mpleted by uni           | 1  |                                |                      |                          |  |  |
|  |                              |                          |  |                                |                      |                          |  |  |
| Signature of unit leader (or designee)   |                              |                          |  |                                |                      |                          |  |  |
| Signature of unit leader (of designee)   | Date                         |                          |  |                                |                      |                          |  |  |
|  |                              | lf ar                    | plicant has unexpir  | ed membership certificat       | te registration ma   | who personalished at     |  |  |
| Unit type: OPack OTroop OCrew OShip OLone Cub Scout OHas earned<br>OLone Scout Arrow of Light Unit No.: For pack registration select one: OLion OTiger OWolf OBear Owe |                              | noc                      | If applicant has unexpired membership certificate, registration may be accomplished at no charge by transferring the registration or multiple registering. |                                |                      |                          |  |  |
|  |                              | OTr                      | OTransfer application Enter membership number<br>OMultiple application from unexpired certificate:   |                                |                      |                          |  |  |
|  | ne: OLion OTiger OWolf OBear |                          | ultiple application  |                                |                      |                          |  |  |
|  |                              |                          | ncil No.:  | Unit OPack OTroc<br>type:      |                      | rict name:               |  |  |
|  |                              |                          |  | OCrew OShip                    | p                    |                          |  |  |
| Registration fee \$ PAID: O Cash O Check No O Credit card  |                              |                          |  |                                |                      |                          |  |  |