# TAKE YOUR SHOUT BEST SHOUT

JUNE 22, 2023
ABERDEEN GUN CLUB
4:30 PM REGISTRATION OPENS
5:00 PM SHOOTING BEGINS
REGISTER BY JUNE 15
LIMITED TO FIRST 20 TEAMS



5 PERSON TEAM \$550 - DINNER - SHELLS - GAMES - PRIZES Sponsored by:





For questions, call 605-226-2100. Email form to rick.kline@aberdeenroncalli.org or mail it to: 1400 N. Dakota St., Aberdeen SD 57401

## Registration Form

Team Name:	
Contact Phone Number:	_
Contact Email:	_
Shooter 1:	
Shooter 2:	
Shooter 3:	
Shooter 4:	
Shooter 5:	



Lumen Christi is a program of the Diocese of Sioux Falls that gathers college students and seminarians into teams of four and sends them out to parishes. These missionaries are excited to get to know you and give witness to the love of God in their lives.

Contact your parish office for more information.

# Join Us!

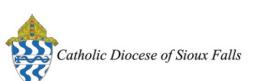
#### Monday, June 12th - Thursday, June 15th

• Grades 1-6 (going into): 8:30am - 12:00pm

• Grades 7-12: 7:00pm - 9:00pm

Location: Sacred Heart Parish Hall: 411 3rd Ave SE

Register online at sacredheartaberdeen.net/lumen-christi OR stmarysabr.com/lumen-christi
OR in either parish office: Sacred Heart: 225-7065, St. Mary's 229-4422











#### Lumen Christi, meaning 'Light of Christ', is our Catholic Summer weeklong program for children, middle school, and high schoolers!

<b>Dates</b> Grades	<u>1-6</u> : June 12 - June 15 (M	Ionday – Thursday	- every o	day) 8:30am—12:0	0pm*
Grades	7-12: June 12- June 15 (M	Ionday – Thursday	y - every	day) 7:00pm-9:00p	om
Place: Sacred Hear	t Parish Hall - 411 3rd Ave	SE, Aberdeen			
<b>Cost:</b> \$15.0	0 per child - payable to your	parish		Registration Deadline: Monday, June 5 <sup>th</sup>	
Send to/drop off:	Thomas Eskro Sacred Heart Church 502 2 <sup>nd</sup> Ave SE Aberdeen	Sarah Barstad St. Mary's Ch 409 2 <sup>nd</sup> Ave N Aberdeen	nurch		Includes T-Shirt!
Child's Name			Age	Grade Next Fall	T-Shirt Size
Mom Name	my kids before for Lumen C Dad Nam Dad Cel	ne			et info
Mom Email	Dad En	nail			
Allergies or other me	Dad En				
Emergency Contact	Name	·	Phone N	umber	
I give my permission f also hereby authorize t assume that with any a the staff and team from participants.	SE / LIABILITY WAIVE for my son/daughter, the delivery of any necessary en activity there are risks and I release an any liability arising out of any	to pa mergency medical ca ease the Sioux Falls y injury or accident	are by ava Diocese, which ma	ailable medical person: Sacred Heart Parish, S	nel. Further, I t. Mary's Parish,
Signature of Parent/Gu	iardian	D	ate:		

Volunteers needed – please contact Sarah or Thomas if you are willing to help out, thank you!

Be sure to mark your calendar for the Corpus Christi Eucharistic Procession on Sunday, June 11th and the Feast of the Sacred Heart parish celebration on Friday, June 16th!

# SACRED HEART RUMAGE SALE SALE

# FRIDAY, JUNE 2 7 AM-7 PM

1400 N. DAKOTA ST, ABERDEEN (RONCALLI HIGH SCHOOL)

### FREE WILL DONATION

Proceeds benefit Sacred Heart - cash donations accepted!

Donations for the sale can be dropped off Wednesday, May 31 and Thursday, June 1 from 4-7 pm.

# **CAVALIERS**

#### BASKETBALL

Dates: May 30, 31, June 1

**Camp Times** 

Grades 3 and 4 11:00-1:00

Grades 5, 6, and 7 1:00-3:00

Coach Larson
derek.larson@aberdeenroncalli.org
229-4100 or 216-6770

Cost of Camp is \$50. Please make checks payable to Roncalli Basketball.

Each Camper will receive a camp t-shirt

Camp will be held at Roncalli High School



We would like to invite you to our 2023 girls' basketball camp. This year's camp will be held at Roncalli High School. The camp will be conducted by Roncalli coaches and athletes. Each camper will be given a camp shirt and evaluation. This year we are having camp for three consecutive days. Each day will consist of different drills, fundamentals, and team play.

#### PLEASE RETURN BY MAY 19th

	. 22.02.112.011.12.11.11.11.21		
	Please print clearly using block letters.		
PLAYER'S LAST NAME		FIRST NAME	
BIRTH DATE	GRADE NEXT YEAR	SCHOOL	
PARENT OR GUARDIAN'S LAST NAME		FIRST NAME	
MAILING ADDRESS			_
CITY	STATE	ZIP	
HOME PHONE	WORK PHONE	CELL PHONE	
EMAIL ADDRESS (Optional)			

Parent or Guardian Authorization and Liability Waiver: I hereby acknowledge that my child is ready for vigorous activity at the Roncalli Basketbal Camp and authorize the director to secure any emergency treatment deemed necessary. I hereby release the director, coaches, officials, Roncall High School, Aberdeen Catholic School System and any sponsors of the camp from all claims because of any injuries that may be sustained by my child while participating in the camp. I also understand that any medical bills incurred by my child while in attendance at the camp will be my responsibility or my family health insurance plan.

T-Shirt Size

Please circle one

Adult: S M L XL

Other

Signature of Parent/Guardian

Date



# June 6, 13, 20, 27, and July 11

#### Roncalli High School - Aberdeen, SD

4-6th Grade: 5:30 & 7:00 pm • 7-8th Grade: 6:15 & 7:45 pm

The Hub City Girls Basketball Summer League is open to all girls' basketball players entering grades 4 through 8. The league will offer five nights of organized games (two games each night). Games will be 16-minute halves with a running clock. Players will be placed on teams by league officials. Every effort will be made to create team parity and competitive play. Team rosters will be posted at the gym. A tournament will be held on the last night.

\$50 Includes 10 games and a league t-shirt. Trophies will be awarded to the winners of the tournament.

# \*\*\*Family Rates\*\*\* 2 players \$90 / 3 players \$110 Registration Deadline: May 26

For more information, call Derek Larson at 229-4100 or 216-6770

Make payment to Cavalier Basketball. Mail registration form to: Derek Larson, 1400 N. Dakota St., Aberdeen, SD 57401 Anticipated position: **Guard**, **Post** (**Please Circle One**) We will try to accommodate equally per team.

	Please print clearly using block letters.	
PLAYER'S LAST NAME		FIRST NAME
BIRTH DATE	GRADE NEXT YEAR	SCHOOL
PARENT OR GUARDIAN'S LAST NAME		FIRST NAME
MAILING ADDRESS		
CITY	STATE	ZIP
HOME PHONE	WORK PHONE	CELL PHONE
EMAIL ADDRESS (Optional)		
Summer League and authorize the director to secure any Roncalli High School, Aberdeen Catholic School System a	I hereby acknowledge that my child is ready for vigorous activity at the emergency treatment deemed necessary. I hereby release the direct and any sponsors of the league from all claims because of any injuries and that any medical bills incurred by my child while in attendance at	tor, coaches, officials, that may be sustained T-Shirt Size
		Adult: S M L XL
Signature of Parent / Guardian	Date	Other

HUB CITY BOYS
SUMMER LEAGUE
BASKETBALL

5TH/6TH GRADE: 5:30/7:00 7TH/8TH GRADE: 6:15/7:45

#### MONDAYS: JUNE 5-JULY 17 (NO GAMES ON JULY 3)

#### ALL GAMES @ RONCALLI HIGH SCHOOL

The Hub City Boys Basketball Summer League is open to ALL boys' basketball players in the Hub City and surrounding areas entering grades 5 through 8. The league will offer six nights of organized games (two games each MONDAY night). Games will be 16-minute halves with a running clock. Players will be placed on teams by league officials. Every effort will be made to create team parity and competitive play. Team rosters will be posted at the gym. A tournament will be held on the last night.

\$50 per Player \*\*\*Family Rates\*\*\* 2 players \$90 / 3 players \$110 Registration Deadline: May 27

Contact Dan Gallagher for more information @ (605)-216-4763 or dan.gallagher@aberdeenroncalli.org

Player Information:			
Name:		Grade Next Scho	ool Year:
School:	DOB:	Height:	Shirt Size:
Parent's Name:	Phone:		
Email:			
Make payment to Cavalier Basketball. I Parent or Guardian Authorization and activity at the Roncalli Basketball Sum deemed necessary. I hereby release th System and any sponsors of the league playing in the league. I also understand will be my responsibility or my family h	Liability Waiver: I hereby mer League and authorize de director, coaches, office from all claims because d that any medical bills in	acknowledge that my the director to secur ials, Roncalli High Sch of any injuries that m	y child is ready for vigorous re any emergency treatment nool, Aberdeen Catholic School nay be sustained by my child while
Signature of Parent / Guardian	Date		

"JOIN THE GOLD/ELITE SHOOTING CLUB"

The Aberdeen Roncalli Basketball Programs are challenging all of their athletes - 2nd Grade through 12th Grade - to complete the Cavalier Elite Shooting Challenge, a challenge to shoot as many game-like shots as possible between the months of May and August. **Goal: 10,000 shots per athlete** 

#### WHAT DOES THE CHALLENGE OFFER:

- A range of workouts for various levels of skill (Beginner, Intermediate, Varsity, Advanced)
- · Game-like shot workouts at game speed
- Gym time for all participants (although not necessarily required)
- Partner accountability
- Shot Tracker for every day of each month from May through August

Participants in the Challenge will have the opportunity to earn a Dri-Fit T-shirt and entry into either our GOLD or ELITE CLUBs. Requirements for each club are as follows:

GOLD CLUB (10,000 Shots)	ELITE CLUB (15,000 Shots)
Shoot a total of 10,000 shots between May-Aug	Shoot a total of 15,000 shots (7th Grade or Older)
Workouts can be done in a gym, playground, driveway, etc.  *We encourage 2nd-3rd grade to shoot on age-appropriate hoops to continue to develop proper form and shooting mechanics	For shots to count, all workouts must be done at Roncalli High School during designated times
Can complete any level of the designated workouts (All levels include multiple workouts)	Participants must complete the Varsity or Advanced workouts (both levels include three separate workouts)
Parent/Workout Partner verification signature upon each day's completion	Workouts must be completed with a partner and signed off by a Coach upon each day's completion

<sup>\*</sup>Workouts must be completed in their entirety for the shots to count toward the total.

Workouts, the shot tracker, and weekly gym availability will be shared with the participants and their parents via Remind App upon registration.

At the end of each week, all participants will share their shooting progress with Coach Gallagher via the Remind App or through email at dan.gallagher@aberdeenroncalli.org. Progress reports will be posted at the beginning of each week in the RHS gymnasium. For more information, please reach out to Coach Gallagher.

COST: \$35 - Registrations are due by April 28th

#### <u>ABERDEEN RONCALLI YOUTH</u> STRENGTH & CONDITIONING PROGRAM

#### Who can attend?

This program is designed for any Aberdeen Roncalli students entering grades 6-8, boys and girls.

#### **Location & Times**

#### **Dates**

Roncalli High School 10:30-11:15

June 1st - August 2nd (Tuesdays, Wednesdays, & Thursdays)

#### What to Expect

- Strength Training (Weight-Lifting Movements)
- Speed Training
- Acceleration Training
- Agility Training

<sup>\*</sup>Workouts are led by Coach Dan Gallagher



#### Registration Fees

\$85 \*\*Participants will be added to a Remind Group to stay up to date with changes and important information\*\*

Please have registration forms retu	urned to the Central Office or Coach Gallagher by May 27th.
Student's Name:	Grade for 2023/2024 school year:
DOB: Phone:	Email:
Please list any medical conditions you would li	ke the organizers to be made aware of.

By my signature below, I acknowledge that I am aware of, appreciate the character of, and voluntarily assume the risks involved in my child participating in all activities associated with and available at Roncalli High School. Under certain circumstances, adopting an exercise program has some inherent risks. A medical examination is encouraged before starting an exercise program. By my signature below, I hereby waive any claim or cause of action against and release from liability the Aberdeen Catholic School System and employees for any liability for injuries to my person or property resulting from my participation in the activities above, and I consent to receive any medical treatment deemed advisable in the event of injury, accident or illness during these activities; I HAVE READ THIS ASSUMPTION OF RISK, WAIVER OF LIABILITY, AND RELEASE AGREEMENT, AND I FULLY UNDERSTAND ITS TERMS. I FURTHERMORE UNDERSTAND I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING THIS DOCUMENT, AND I HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME. I INTEND, AND I FULLY UNDERSTAND, THAT THE EXECUTION OF THIS AGREEMENT CONSTITUTES A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Parent's or Guardian's Signature:	Athlete's Signature: