



BASKETBALL CLINIC
FOR BOYS AND GIRLS GRADES 1 - 5TH
Sponsored by TCSF Varsity Boys Basketball Team and Coaches

MARCH 6th, 2010

1:00 - 4:00 p.m.

ST. ELIZABETH ANN SETON GYM

1:00 - 1:30 p.m. Check- in and Pictures with Varsity Players

1:30 - 3:30 p.m. Learn basketball offensive and defensive skills:
Learn how to pass, dribble, shoot, defend and
have FUN playing basketball! The coaches and
Varsity players will show you how!

3:30 - 4:00 p.m. Bring a t-shirt or hat to have the Team
autograph it for you - or use the t-shirt you
will receive with registration.

Please turn in this registration form, payment, and release form
to any GTACS Office before Monday March 1st.

The team is looking forward to seeing you and playing basketball
on Saturday, March 6th!!

**COST: \$25.00 Includes T-SHIRT AND A PHOTO with Varsity
players.**

Please make all checks payable to **SF BASKETBALL.**

If you have any questions please email Kathi Sheldon

kasbythebay@aol.com or Linda Schell @ lschel@gtacs.org



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Name _____
Home Phone _____
Parent's Cell Phone _____
Address _____
Grade _____ School _____
Homeroom Teacher _____
T-shirt size _____

Medical Release Information

Each participant must have personal medical insurance. Any accident or illness will be treated at Munson Medical Center. I hereby authorize the Basketball Clinic to act according to their best judgment in any emergency requiring medical attention. The undersigning acknowledgement that to the best of his/her knowledge and belief the camper has no physical disability or problem that would restrict in any way the camper's ability to participate in this program. I further release Grand Traverse Area Catholic Schools from any claim relative to any pre-existing condition/ disability.

Parent Name (printed): _____
Signature of Parent / Guardian: _____

Medical Insurance Co. _____
Policy # _____
Emergency Contact Name & Phone Number _____

Doctor's Name & Phone Number - _____