



GIRLS' 6th Grade Basketball Instructional Basketball Series



Under the direction of the Mona Shores Girls Basketball Coaching Staff

Visit www.msybb.com for more information

Parent Meeting: Sunday, November 1st – All parents attend
6:00 pm - High School Cafeteria - Sailor Center entrance on west side of building
Students do not need to attend

Dates: Nov 9, 11, 16, 18, 23, 30
Dec 2, 14, 16

Time: 6:00-7:30 PM

Place: Ross Park Elementary

Fee: \$65.00 (includes shirt if registered by deadline)
Deadline is Friday, October 30th.

In addition to building upon fundamental skills, players will learn how to take advantage of game situations, playing in 2v2 and 3v3 scenarios as well as 5 on 5 full court scrimmaging.

Complete this registration form and return to Mona Shores Community Services by October 30th
Forms may be mailed, delivered or emailed to smithc@monashores.net (scan or picture of completed form).

If you cannot attend a clinic as planned, a refund less \$10 cancellation fee and price of t-shirt will be issued. No refunds are available after first session is held.

Girls' 6th Grade Basketball Registration 2020 - \$65.00

Mona Shores Community Services
121 Randall Road, Norton Shores, MI 49441
Phone: 231-332-8254

Please Sign Waiver Below!

On condition of this registration form being accepted, I hereby state that my child is in a state of good health and I assume all risks associated with participating in this activity. Having read this waiver, I, for myself, my child and anyone entitled to act on behalf, waive and release Mona Shores Community Services and Mona Shores Schools and any other agents from all claims of liabilities of any kind arising out of my child's participation in this activity.

Signature of Parent

NAME: _____

PARENT NAMES: _____

PHONE: _____ PHONE: _____

EMAIL ADDRESS: _____

ANY HEALTH PROBLEMS? _____

Shirt Size: Youth: S M L Adult: S M L XL

Credit Card Cash Check Check # _____

For Credit Card Use Only:

I authorize Mona Shores Community Services to charge my credit card. All information provided remains confidential.

Signature _____ Date: _____

Amount: _____ Zip code: _____ 3 digit code: _____

Please charge my: Visa MC Exp. Date _____

Card #:

