GCMS BOYS BASKETBALL 2017 YOUTH LEAGUE

Who: Current 2nd-5th Grade Boys

When: Starts January 7th and ends February 18th

PRACTICE DATES/TIMES

Date	Location	Times: 2 nd -3 rd	4 th -5 th
Saturday Jan. 7	High School	8:00-9:30am	8:00-9:30am
Saturday Jan. 14	High School	8:00-9:30am	8:00-9:30am
Saturday Jan. 21	GAMES WILL BE	GIN _	

- Schedules for games will be not be handed out until January 14th due to the game schedule depending on how many participants/teams we have. All games will be played between 8:00-10:00am on Saturdays and your child will only play one game each Saturday starting at either 8:00 or 9:00am.
- There will be one additional practice per week starting on the week of Tuesday January 17th. The practices will be one hour per night and once a week for remainder of Falcon Academy. This schedule will be handed out January 7th.

Cost: \$25 per athlete – checks payable to GCMS CUSD #5

Location: GCMS High/Elementary Schools

Gear: Participants will receive a camp shirt and are required to wear soft sole shoes.

Games: Saturday Mornings starting January 21st

2nd-3rd Grade Games will be at Elementary/4th-5th at HS

PLEASE HAVE REGISTRATION RETURNED BY JANUARY 7TH

All weather cancellations or schedule cancellations will be posted on GCMS website as soon as possible

The GCMS coaching staff is pleased to extend an invitation to our youth league program. The program will provide the necessary mixture of fundamental teaching with game competition and will coincide with what is taught at summer camps. We are very excited you have your child involved with the GCMS Boys Basketball Program!

Email Ryan Tompkins for questions at Tompkins.ryan@gcmsk12.org

GCMS YOUTH LEAGUE REGISTRATION FORM

Name of Camper:							
Current Grade:							
Parents or Guardians Names:							
Phone:							
Shirt Size (Circle One):	Youth Sizes:	S	M				
	Adult Sizes:	S	M	L			
		XL	XXL				
In accepting this entry I under agents, representative commi responsible for any accidental during the camp or travel to a	ittees, and the GC I damages or inju	CMS Boaries suf	ard of I fered b	Education are not by me directly			
Parent or Guardian Signature:	Date						
Camper Signature:	Date						
PARTICIPANT CHECKLIST: Sign the above registration Fill out insurance waiver (on back) Entry Fee (check payable to GCMS) Proof of insurance (photo copy of insurance card)							
Proof of Insur	ance (photo	сору	of ir	nsurance car	d)		