

OLMSTED FALLS BOYS BASKETBALL
2010 DEVELOPMENTAL BASKETBALL LEAGUE



We are pleased to announce the start of the 2010 Boys Developmental Basketball League for all boys in 4th, 5th and 6th grades. Players will participate in skill sessions and play team games on Saturday (one Wednesday) mornings during the months of October, November and December. Basketball skills, game situations, & rules will be taught by the Olmsted Falls Varsity Basketball coaches and players. The league emphasizes the basic skills, game rules, and teamwork in an atmosphere designed to be educational and enjoyable for your son. All practices, games, and skill sessions will be held at Olmsted Falls High School with the exception of one that will be held at the Intermediate School. All participants will also be invited to play at halftime of a Varsity Boys Basketball game.

This years league will begin on Saturday, Oct. 30 and conclude on Saturday, December 4
Possible Times: 8:00 am-10:00 am, 10:00 am-12:00 noon, or 12:30-2:00 pm

SAVE DATES FOR YOUR RECORDS

- Saturday, Oct. 30, 2010: 8-10 a.m.
- Saturday, November 6, 2010: 12:30-2 p.m.
- Saturday, November 13, 2010: 8-10 a.m.
- Saturday, November 20, 2010: 10-12 noon
- Wednesday, November 24, 2010: 8-10 a.m.
- Saturday, November 27, 2010: 10-12 noon (at Intermediate School)
- Saturday, December 4, 2010: 10-12 noon

The cost of this year's Developmental Basketball league is \$50, which includes instruction and admission to a varsity basketball game for the participant and a t-shirt at the end of the league. Registration and fees will be accepted *up to and including Saturday, October 30st*. To pre-register, simply fill out and return the lower portion of this information page along with \$50 payment to Mr. Ciolek at the high school, Mr. Willson at the middle school, or Mr. Tabar at the Intermediate. Save the top portion for your records. Please use a sealed envelope with your son's name and grade written on the outside when registering. Checks should be made out to OLMSTED FALLS ATHLETIC BOOSTER CAMP FUND. In the memo portion of the check, please write: BOYS BASKETBALL KIDS LEAGUE.

Cut here and save the top portion for your records

Name: _____ Grade: 4 5 6 Homeroom # _____

Parent/Guardian: _____ Phone: _____

Alternate person to contact in emergency: _____

Phone: _____ Relation: _____

Health Insurance Company and Number _____

Players T-Shirt Size (Adult sizes) S M L XL

I recognize and understand that activities will be held with safety as the first concern. I will not hold any member of the Olmsted Falls School staff responsible for any accident or injury to my child or any other family member.

Parent's/Guardian's signature

Date

Check # if App.