

# 2017 Arrowhead Youth Fall Basketball League

At Arrowhead High School, North Campus, West Gym

**League Dates: Nov. 18<sup>th</sup>, Nov. 25<sup>th</sup>, Dec. 2<sup>nd</sup>, Dec. 9<sup>th</sup>, Dec. 16<sup>th</sup>**

Grades 1<sup>st</sup> & 2<sup>nd</sup> from 8:00 A.M. - 9:00 A.M.

Grades 3<sup>rd</sup> & 4<sup>th</sup> from 9:00 A.M. - 10:00 A.M.

Lower Baskets will be used for 1<sup>st</sup> and 2<sup>nd</sup> graders.

Small balls will be used for all ages.

Coaches will be Arrowhead High School Basketball Players & Staff

Teams will consist of a maximum of 10 players. (Everyone will play equal time in games.)

Players will work on agility drills, dribbling drills, shooting form, and passing drills for the first 30 minutes. The last ½ hour will be designated for game time. A t-shirt for each player will be provided. **Every attempt will be made to put kids from the same school on the same team.** Any questions contact Craig Haase at [haase@arrowheadschoools.org](mailto:haase@arrowheadschoools.org)

**Price = \$50.00: payable to Arrowhead Boys Basketball**

Send checks to:

Craig Haase  
800 North Avenue  
Hartland, WI 53029

Player's Name \_\_\_\_\_

Player's T-Shirt Size: Youth S \_\_\_\_ Youth M \_\_\_\_ Youth L \_\_\_\_ Adult S \_\_\_\_

Player's Grade \_\_\_\_\_ Players Grade School \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone# \_\_\_\_\_ Email \_\_\_\_\_

My son has permission to attend this basketball school. I do not hold the program, the school, or the staff liable while my son is participating in this camp. I acknowledge that at camp my son will participate in a sport that may involve physical contact with other persons or objects, including the floor, which could result in injury. I acknowledge that I must have adequate health insurance to cover any injuries while involved in this program.

Signature \_\_\_\_\_ Date \_\_\_\_\_

