

BOYS REEDSBURG AREA YOUTH BASKETBALL- RAYB REGISTRATION

All specific dates will follow in future communication

Download/Print forms at reedsburgsports.net/basketball

2nd, 3rd & 4th GRADES

- Skill and Drill Clinics to be held on Saturday mornings from 8:00 am – 9:30 am at Webb Middle School in November and December
- “Beaver Ballers” League Intramurals will be held on Monday nights from 6:00pm – 8:00pm at South School in January and February League T-shirts will be provided. **FEE IS \$35**

- 3rd and 4th Grade Introduction to traveling basketball with 2 to 3 competitive tournaments November – March **FEE IS \$40**

_____ My son would like to attend Saturday Morning Clinics and Monday League (if applicable) \$35

_____ My son would like to participate in RAYB Traveling Team \$40

_____ My son would like to participate in BOTH the Saturday Morning Clinics and RAYB \$60

5th & 6th GRADES

- Skill and Drill Clinics to be held on Saturday mornings from 8:00 am – 9:30 am at Webb Middle School in November and December
- “Future’s” League Intramurals will be held on Monday nights from 6:00pm – 8:00pm at South School on November and December (League T-shirts will be provided) **FEE IS \$35**

- Traveling League (club) basketball. Players join teams that compete in some weekend tournaments November - March **FEE IS \$75**

_____ My son would like to attend Saturday Morning Clinics and Monday League (if applicable) \$35

_____ My son would like to participate in RAYB Traveling Team \$75

_____ My son would like to participate in BOTH the Saturday Morning Clinics and RAYB \$90

7th & 8th GRADES

- Skill and Drill Clinics to be held on Saturday mornings from 9:30 am – 11:00 am at Webb Middle School in November and December **FEE IS \$35**

- Traveling League (club) basketball. Players join teams that compete in some weekend tournaments December - March **FEE IS \$75**

_____ My son would like to attend Saturday Morning Clinics and Monday League (if applicable) \$35

_____ My son would like to participate in RAYB Traveling Team \$75

_____ My son would like to participate in BOTH the Saturday Morning Clinics and RAYB \$90

Application/Waiver

Name: _____

Address: _____

School: _____ Grade: _____

Home Phone: _____ Cell Phones: _____

Mothers Name: _____ Fathers Name: _____

Parents Emails: _____

T-Shirt Size: S M L XL

Insurance Company you have a Health policy with _____

Is your child presently taking any medications? _____

Is your child allergic to anything? _____

I hereby authorize coaches to act for me according to their best judgment in any emergency requiring medical attention for my daughter. I hereby state that I am aware of and accept the risk inherent in the program activity. The below signed does hereby agree to hold harmless and indemnify the State of Wisconsin, the School District of Reedsburg, their offices, agents, employees and anyone associated with these basketball events from any and all liability, loss, damage, costs, or expenses which are sustained, incurred, or required arising of my dependent in the course of the camp.

Parents Signature _____ Date _____

PLEASE RETURN ALL REGISTRATION FORMS TO: RAYB, PO BOX 201, REEDSBURG, WI 53959

Return before September 15, 2010

Please forward questions or comments to rayb@reedsburgsports.net