

** Boys this pro for tou and fur the wir

Bonduel Boys'
Youth Basketball

Boys must participate in s program to be eligible tournament basketball d further practices during winter season. **	 Grades 1-2 Grades 3-4 Grades 5-6 Grades 7-8 	8:30-9:30 9:30-10:4	(New HS Gym) (New HS Gym) 5 (New HS Gym) 00 (New HS Gym)	November 11, 25 December 2, 16 January 6, 13
Name: Last			·	
Last		F	irst	Grade
Address:				
Street		City	State	Zip
Phone ()		()	-	
Email				
T-Shirt Size (Circle One) Yo	outh – S M L	XL Adu	lt-SML>	KL
Program Fee \$25 – Payable (contact Coach Copp with ques coppduk@bonduel.k12.wi.us	e to: Bonduel			
Mail form & Check to: ** Registration Due **			adjusted once the number of	
Duke Copp			participants in each group is	
Bonduel High School			determined.	
400 W. Green Bay Street				
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Bonduel WI 54107				

PARENTAL PERMISSION

My son has my permission to attend Saturday Morning Basketball and any games or tournaments that are set up for participants. I understand that injuries can happen while participating, and that the coaches, volunteers, and the School District of Bonduel will not be held liable for such injuries. I also am aware that insurance is not provided and that it will be the responsibility of each parent.

Name of child:_____

Parent or Guardian Signature: _____