



Brewster Sports Center

Don't Stop Playing

Join

Developmental

Spring II 2011

Boys & Girls

- **30 Minutes Instruction on Offense (dribbling, shooting, passing) and Defense (stance, closeouts, slide, help defense)**
- **30 minute game**

Includes BSC Jersey

Class size – 16 players

Boys Ages 8-9 Price: \$230.00

Every Tuesday -- 5:00–6:00pm

May 10th, 17th, 24th, 31st

June 7th, 14th, 21st, 28th

Boys Ages 10-11 Price: \$180.00

Every Wednesday -- 5:30 – 6:30pm

May 25th

June 1st, 8th, 15th, 22nd, 29th

Girls Ages 8-10 Price: \$180.00

Every Thursday -- 5:30 – 6:30pm

May 26th

June 2nd, 9th, 16th, 23rd, 30th

For More Information
Please Contact us at: (845)278-2040

Developmental Basketball Spring II 2011

Name: _____

Select One: Player's Age: _____

- | | | | |
|--------------------------|------------|----------------------------|------------|
| <input type="checkbox"/> | Boys 8-9 | Tuesday -- 5:00 – 6:00pm | Fee: \$230 |
| <input type="checkbox"/> | Boys 10-11 | Wednesday -- 5:30 – 6:30pm | Fee: \$180 |
| <input type="checkbox"/> | Girls 8-10 | Thursday -- 5:30 – 6:30pm | Fee: \$180 |

Parent(s)'s Name: _____

Address: _____

City, State, Zip: _____

Day Telephone: (_____) _____

Evening Telephone: (_____) _____

Mobile Phone: (_____) _____

Email: _____

Please send your completed form with check payable to ***Brewster Sports Management.***

Send To: Brewster Sports Center
 19 Sutton Place
 Brewster, NY 10509

ALL PAYMENTS ARE NONREFUNDABLE. \$25 bounced check fees. All players are responsible for their own insurance.

Disclaimer: I hereby authorize the staff of the "Brewster Sports Center" to act for me according to their best judgment in any emergency requiring medical attention and I hereby waive and release "Brewster Sports Center" from any and all liability for any injuries or illnesses incurred while participating at the facility or property. I have no knowledge of any physical impairment that would affect the player's participation, named to the above, in the league or tournament as outlined in the information. I also understand that "Brewster Sports Center" has the right to use, for publicity and advertising purposes, photographs of participants taken at the facility. I understand and accept the tournament/league fees and refund policies.

Signed: _____ Date: _____

Parent or Guardian Signature: _____

Health Plan (Name): _____ Identification #: _____