



# Raymond Central Youth Sports Association

## Basketball Clinic Registration

**WHO:** 1st and 2nd grade boys and girls

**WHAT:** Basketball skills clinic

**WHEN:** Mondays and Thursdays, 5:30-6:30 p.m., December 1-18

**WHERE:** Monday practices will be held at the Ceresco elementary gym;  
Thursday practices will be held at the Valparaiso elementary gym

**COST:** \$25 (Make checks payable to RCYSA; includes an RCYSA basketball t-shirt)

**REGISTRATION:** Please complete the form below and return it to your school office by Monday, November 17.

**CONTACT:** Please direct any questions to Aaron Stover at  
aaron.stover@megroup.com or 402-580-0323

The Raymond Central Youth Sports Association (RCYSA) is a volunteer organization with a mission to encourage youth development by providing opportunities for personal and athletic growth. RCYSA promotes sportsmanship, self-esteem, commitment and the development of skills through athletic opportunities that will provide a safe, healthy and positive learning environment. Visit RCYSA at [www.rcyouthsports.org](http://www.rcyouthsports.org).

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### 2014 Basketball Clinic Registration Form

Participant Name: \_\_\_\_\_ Grade: \_\_\_\_\_

T-shirt size (circle one): Youth Sm Youth M Youth L Adult Sm Adult M

Parent Contact Information – Name: \_\_\_\_\_

Phone number(s): \_\_\_\_\_

Email address: \_\_\_\_\_

In case of emergency please contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ Please check here if you are interested in serving as a coach. A coaches clinic will be held prior to December 1 to cover drills that will be run during the clinic.

\_\_\_\_\_ Please check here if you are interested in being a parent-helper during the skills clinic.

I give permission for the above-named participant to participate in the RCYSA basketball clinic. I understand that the Raymond Central Youth Sports Association and Raymond Central Public Schools have no responsibility, assume none, and do not carry insurance for the benefit of participants. I assume full responsibility for medical expenses and well-being and all rights against the Raymond Central Youth Sports Association and Raymond Central Public Schools are waived.

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