



Y-BASKETBALL

- Rookie League (Sat. Clinics NO GAMES)**
Recreational league designed for learning.
Progressive developmental league.
Age breakdown: Pre K-K, 1st-2nd, 3rd-4th, 5th-6th
\$55 Program Fee
(Jersey required \$25)
- Youth Basketball League**
Competitive League. Some altered rules.
Grade breakdown: 1st-2nd, 3rd-4th, 5th-6th, 7th-8th
\$55 Program Fee
(Jersey required \$25)

PLAY BEGINS: JUNE 6TH-AUGUST 10TH

Team Fee- \$450

The team fee is open to any team (Max. 12 players) that registers with the YMCA as a whole. Fee includes program membership and basketball fees. **YMCA Jerseys must still be purchased**

**Fee must be paid in full when team packet is turned in.

Rosters can't be changed after the coaches meeting**

Any open spaces on roster can be filled by sports director if needed.

Sports Director reserves the right to move any individual or team based on skill level.

Grade Based off of 2008-2009 School Year

Basketball Only

· Basketball Basics - Rookie League: This progressive basketball program focuses on recreation and developing skills, for players new to the sport or not ready for game play. Clinics are held on Saturday at the Sahuarita Intermediate School.
· Youth Basketball League: For players with 3 or more seasons experience, teams from the Rookie league that have improved their skill level will make the transition to the competitive league.

Volunteers and Instructors are needed for all sports	
Volunteer Involvement:	
<input type="checkbox"/> Coach	<input type="checkbox"/> Asst. Ref
<input type="checkbox"/> Coach/	<input type="checkbox"/> Ref

Limited Financial Assistance is available for applicants who qualify; DEADLINE to apply is May 10
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ALL GAMES AND PRACTICES WILL BE HELD IN SAHUARITA!

(Based on the number of participants)

Coaches Email: _____ (Use for weekly updates)

CHILD'S NAME _____ Grade _____ AGE _____ DOB ____/____/____ SEX: _____

SCHOOL _____ E-MAIL _____

ADDRESS _____ APT. _____ CITY _____ ZIP _____

MAJOR CROSS STREETS _____ YEARS PLAYED _____ T-SHIRT SIZE: YS YM YL AS AM AL AXL AXXL

PRIMARY CONTACT _____ HOME # _____ CELL or WORK # _____

EMERGENCY CONTACT _____ HOME # _____ CELL or WORK # _____

SPECIAL REQUESTS/COACH REQUEST * Special requests must be noted on registration form to be honored. Not all requests will be honored.*
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<table border="1"> <tr> <td>Sport Fee</td> <td style="text-align: center;">\$</td> </tr> <tr> <td> </td> <td style="text-align: center;">\$</td> </tr> <tr> <td>Basketball Uniform</td> <td style="text-align: center;">\$</td> </tr> <tr> <td>TOTAL FEES</td> <td style="text-align: center;">\$</td> </tr> </table>	Sport Fee	\$		\$	Basketball Uniform	\$	TOTAL FEES	\$	<p style="text-align: center;">HOW TO PAY</p> <p><u>In Person:</u> Cash, Check, Money Order, or Credit Card <u>Mail:</u> 60 W. Alameda. Tucson, AZ 85701 <u>Phone:</u> 520-623-5200 <u>Fax:</u> 520-623-8917 here (Credit Card Only)</p> <p>CREDIT CARD PAYMENT: _____ VISA _____ MASTERCARD _____ A. EXPRESS</p> <p style="text-align: center;">Name as it appears on card:</p> <p style="text-align: center;">_____</p>	<p style="text-align: center;">OFFICE USE ONLY</p> <p>Staff: _____ Date: _____</p> <p>Receipt Issued: Y / N Sports Info. Form Given: Y / N Jersey Issued: Y / N</p>
Sport Fee	\$									
	\$									
Basketball Uniform	\$									
TOTAL FEES	\$									